



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.


Sarah Cooper
Name of Individual Certifying this Document/Proposed Document

Warden
Title

Sarah Cooper
Signature

06-08-2020
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 #: 500.30.06	Page 1 of 8
	Original Effective Date: 06/01/96, 10/15/01	New Effective Date: 10/22/14
	Supersedes: 500.30.06	Dated: 07/15/13
	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: Transfer of Inmate Patient		

POLICY

The Division of Adult Institutions shall provide and receive health care information for all inmate patient transfers between adult facilities and jails to ensure continuity of care.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2014, P-E-01 – Information on Health Services, P-E-03 – Transfer Screening, P-E-12 – Continuity of Care during Incarceration

Wisconsin Statutes s. 302.388 – Prisoner Medical Records

DAI Policy 300.00.35 – Americans With Disabilities Act

DAI Policy 300.00.61 – Limited English Proficiency (LEP) Inmates

DAI Policy 500.50.02 – Health Care Record Format, Content and Documentation

DAI Policy 500.50.06 – Management of DOC Health Care Records

DAI Policy 500.70.01 – Mental Health Screening, Assessment and Referral

DAI Policy 500.80.15 – Transfer of Medications

Health Services Policy and Procedures 300:07 – Medical/Dental Restrictions/Special Needs

DEFINITIONS, ACRONYMS AND FORMS

DAI – Division of Adult Institutions

DCI – Dodge Correctional Institution

DOC – Department of Corrections

DOC-2077 – Health Transfer Summary

DOC-3018 – Intake Screening/Medical History

DOC-3021 – Progress Notes

DOC-3040 – Treatment Notes

DOC-3332B – Medical Restrictions/Special Needs

DOC-3532 – Transfer Screening

DOC-3619 – Transfer of Care Referral and Report

DAI Policy #: 500.30.06	New Effective Date: 1/22/14	Page 2 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

GCC – Gordon Correctional Center

MCC – McNaughton Correctional Center

MWCC – Milwaukee Women’s Correctional Center

OCS – Offender Classification Specialist

SCCC – St. Croix Correctional Center

Temporary Hold – Status of an inmate patient who is in the process of transferring to a facility who stays in an intermediary facility generally for two to three days pending transfer to the identified receiving facility.

TLU – Temporary Lock Up

WCCS – Wisconsin Correctional Center System

PROCEDURES

I. Responsibilities of Sending Facility Prior to Transfer

- A. A nurse shall review the Medical Chart to determine if one or more of the following applies and notify OCS/Security that the inmate patient cannot be transferred:
1. Medical staff shall place a medical hold when treatment for a medical condition must be completed prior to transfer.
 2. The receiving facility cannot accommodate the health care needs of the inmate patient.
 3. Inmate patients with current Workman’s Compensation Claims shall not transfer until all of the medical appointments are completed, unless prior authorization from the receiving HSU Manager and Security Supervisor is obtained.
- B. For facilities having security driven transfers (i.e., TLU) and health care staff are not available to review the Medical Chart prior to transfer, it is the responsibility of the nurse to follow up with the receiving facility on the next scheduled work day to ensure the Health Care Record is transferred. WCCS facilities (GCC, MCC and SCCC) use county jails for TLU and the entire Medical Chart shall be sent.
- C. Assess suitability for travel. Contact OCS/Security if special arrangements must be made.
- D. Determine whether the receiving facility must be notified of significant medical/dental information by telephone prior to the transfer. This includes facilities where the inmate patient will be held as a temporary hold.
1. In this case, both the temporary hold facility and the final receiving facility shall be notified.

DAI Policy #: 500.30.06	New Effective Date: 1/22/14	Page 3 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

2. This contact shall be documented on DOC-3021 – Progress Notes or DOC-3040 – Treatment Notes. Some examples of significant medical information:
 - a. Insulin dependent diabetes management.
 - b. Hemodialysis.
 - c. Any unstable health conditions.
 - d. Oxygen concentrators.
 - e. Hemophilia.
 - f. Scheduled off-site appointments within the next two weeks.
 - g. Oral surgery within the previous two weeks.
 - h. Uncontained wounds.

- E. Upon transfer to and from the DCI Infirmary, a nurse shall complete a nurse to nurse report for every inmate patient transferred using DOC-3619 – Transfer of Care Referral and Report.

- F. Assemble and transfer the Health Care Record according to DAI Policy 500.50.06.

- G. Ensure the inmate patient's prescribed medications are transferred to the receiving facility according to DAI Policy 500.80.15.

- H. Complete a DOC-2077 – Health Transfer Summary if the Medical Chart does not accompany the inmate patient upon transfer and fax the form to the receiving facility.

- II. Responsibilities of Temporary Hold Facility (DAI Intra-System Transfer)**
 - A. Medical: A nurse shall review the Medical Chart within 12 hours of arrival and complete the applicable portion of the DOC-3532 – Transfer Screening. Within the WCCS and at MWCC, a nurse shall review the health care record or DOC-2077 – Health Transfer Summary when next on-site.

 - B. Schedule the inmate patient for a face-to-face assessment if there are complex health care needs.

 - C. Ensure medications, supplies/equipment and modified diets are provided to the inmate patient at the temporary hold facility.

- III. Responsibilities of Receiving Facility**
 - A. Medical: Review the Medical Chart within 12 hours of arrival and complete DOC-3532 – Transfer Screening to ensure continuity of care. Within the WCCS and at MWCC, a nurse shall review the health care record or DOC-2077 – Health Transfer Summary when next on-site.

 - B. Schedule the inmate patient for a face-to-face assessment as necessary if complex health care needs are present.

DAI Policy #: 500.30.06	New Effective Date: 1/22/14	Page 4 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

- C. Intake facilities receiving inmate patients shall follow procedures for the appropriate admission type.
- D. Contact the sending facility if the Health Care Record or completed DOC-2077 – Health Transfer Summary did not arrive with the inmate patient transferred from a DOC facility or jail.
1. Request the Health Care Record be sent via overnight mail in accordance with DAI Policy 500.50.06.
 2. Request the sending facility complete and fax immediately a DOC-2077 – Health Transfer Summary.
 3. Perform a face-to-face assessment and complete a DOC-3018 – Intake Screening/Medical History.
 4. Initiate DOC-3532 – Transfer Screening and complete when Health Care Record arrives.
- E. All medical restrictions/special needs shall remain in effect upon transfer until the Medical Chart is reviewed.
1. The Nurse shall review the DOC-3332B – Medical Restrictions/Special Needs based on the established criteria/guidelines and reissue as appropriate.
 2. Medical restrictions/special needs that have a prescriber's order or do not fall within the established criteria/guideline shall be continued until the inmate patient is assessed and the needs are re-evaluated.
 3. If the medical restriction/special need is in violation of the facility procedures or is not allowed due to the security level, the inmate patient shall be assessed within 24 hours.
- F. A notation shall be entered on DOC-3021 – Progress Notes indicating an inmate patient was received at the facility, transfer screening was completed and any actions taken that were not reported on DOC-3532 – Transfer Screening.
- G. Dental: Review the Dental Record on the next working day. Call the previous facility if the Dental Record did not accompany the inmate patient.
1. Incorporate the recall date into the receiving unit's recall system.
 2. The Dentist shall review the dental chart for potential post-operative follow-up care.
- H. PSU shall follow DAI Policy 500.70.01.
- I. Information collected and documented on the DOC-3532 – Transfer Screening shall be used to update databases and appointment schedules maintained by the Health Services Unit.
- J. A facility may refuse to accept an inmate patient in the absence of the DOC-2077 – Health Transfer Summary or the inmate patient's medical chart.

DAI Policy #: 500.30.06	New Effective Date: 1/22/14	Page 5 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

K. Staff shall make an effort to obtain a copy of the DOC-2077 – Health Transfer Summary via fax prior to refusing to accept the inmate patient.

IV. Information Provided to Inmate Patients About the Availability of Health Care Services

- A. Information may be provided by health services staff or facility staff.
- B. If provided by facility staff, the content must be reviewed and approved by the Health Services Nursing Supervisor.
- C. Written instructions may be in the form of a handbook, a handout, or signage in the inmate patient housing area.
- D. There must be signage in the intake area instructing inmate patients how to access care for immediate health needs. It shall include at minimum:
1. How to request routine health care.
 2. How to request emergency health care.
- E. Facilities shall ensure translated signage is posted in accordance with DAI Policy 300.00.61.
- F. Facilities shall ensure inmate patients who have difficulty communicating understand how to access health services in accordance with DAI Policy 300.00.35 and DAI Policy 300.00.61. These may include:
1. Intellectually disabled.
 2. Illiterate.
 3. Mentally ill.
 4. Deaf.
 5. Visually impaired.
 6. Non-English speaking.

V. Receiving an Inmate Patient from a County Jail

- A. The County Jail shall complete a DOC-2077 – Health Transfer Summary and send it to the DOC facility with the inmate patient at the time of transfer.
- B. The DOC-2077 – Health Transfer Summary shall be provided to the intake staff and forwarded to the onsite medical staff upon receipt of the inmate patient.
- C. Receipt of the DOC-2077 – Health Transfer Summary shall be verified by medical staff/designee by completion of Section 8 of the form.
- D. DOC-2077 – Health Transfer Summary shall be filed in the Medical Chart according to DAI Policy 500.50.02.

DAI Policy #: 500.30.06	New Effective Date: 1/22/14	Page 6 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

VI. Sending an Inmate Patient to a County Jail

- A. The DOC-2077 – Health Transfer Summary shall be completed by medical staff.

- B. If medical staff are not available, non-medical staff designated by the Warden/designee shall complete as much of the DOC-2077 – Health Transfer Summary as possible and send it with the inmate patient at the time of transfer.

- C. When non-medical staff complete the DOC-2077 – Health Transfer Summary:
 - 1. DOC medical staff shall review the form within 24 hours or when next on site for MWCC and all WCCS facilities, to complete Section 7 to verify the accuracy of the information and amend the form if necessary.
 - 2. This does not apply if the inmate patient is returned to the facility within 24 hours.
 - 3. The reviewed and amended form shall be sent to the receiving facility as soon as possible either electronically or faxed.

- D. Place the completed DOC-2077 – Health Transfer Summary in a sealed envelope labeled:
 - 1. **CONFIDENTIAL MEDICAL INFORMATION**
 To be opened by medical staff or designated intake staff immediately
 Inmate patient name, DOC Number
 Date of Transfer
 - 2. File a copy of the DOC-2077 – Health Transfer Summary in the Medical Chart according to DAI Policy 500.50.02.

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: Wisconsin Women's Correctional System		
Original Effective Date: 6/1/96	DAI Policy Number: 500.30.06	Page 7 of 8
New Effective Date: 07/01/2020	Supersedes Number: 500.30.06	Dated: 12/19/14
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		
Will Implement <input type="checkbox"/> As written <input checked="" type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval: Warden Sarah Cooper		

REFERENCES

EMR Job Aid – Nursing 04 – Live to Live Transfers in the Ambulatory Encounter

DEFINITIONS, ACRONYMS, AND FORMS

ACP – Advanced Care Provider

EMR – Electronic Medical Record

PM Conversion – Patient Management Conversion

PSU – Psychological Services Unit

FACILITY PROCEDURE

- I. All documentation of patient transfer between facilities shall occur within the EMR.

RESPONSIBILITY

- I. **Nurse/designee**
 - A. Sending Facility
 1. Review the patient's medical record and determine if a need exists for nurse to nurse communication via telephone regarding patient's needs/condition.
 2. After the patient's arrival at the receiving facility, all scheduled appointments at the sending facility shall be moved to the "on hold" queue in the EMR.
 3. Appointments not scheduled will need to be moved to the correct queue.
 - B. Receiving Facility
 1. Review the patient's medical record and determine if a need exists for nurse to nurse communication via telephone regarding patient's needs/condition.
 - a. Contact the sending facility if a need for communication via telephone is determined and the sending facility has not contacted the receiving facility.
 2. Review the patient's medical record, orders and meds for any missed concerns, need for follow-up, etc.

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Wisconsin Women's Correctional System		
New Effective Date: 07/01/2020	DAI Policy Number: 500.30.06	Page 8 of 8
Chapter: 500 Health Services		
Subject: Transfer of Inmate Patient		

- a. The DOC-2077 Health Transfer Summary may be utilized as a guide for reviewing the chart.
3. Consider referral to ACP as needed.
4. Place referral to psychiatry.
5. Review chart for any pending lab orders.
 - a. Labs ordered but not collected:
 1. Modify the order to include the name of the new ACP.
 - b. Labs ordered, collected and waiting for results:
 1. Review EMR orders and determine if any lab results are pending from the sending facility.
 2. Critical results shall be called to the sending facility as the initial order and accession number is linked to the initial ordering provider.
 3. Be aware of any pertinent pending lab results which would not automatically come to the receiving ACP's Message Center and communicate as needed to the ACP.

II. MPAA/designee

- A. Upon arrival to facility, register patient in the EMR in PM conversation.
 1. ACP must be entered at the time the patient is registered.
 2. Psychiatrist (if known) and PSU clinical staff (if known) shall also be entered at this time.
 3. Review the scheduled appointments in the "on hold" queue and move the appointments from the sending facility's queue to the receiving facility queue.
 4. Do not cancel the 'on hold" appointments. Rather, reschedule the appointments.
 - a. Appointments shall be rescheduled within the same day as transfer or as soon as possible when health staff are available on site.