



## Legislative Fiscal Bureau

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2017

Joint Committee on Finance

Paper #255

### Juvenile Medication Administration (Corrections -- Juvenile Corrections)

[LFB 2017-19 Budget Summary: Page 148, #7]

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#### CURRENT LAW

According to the Department of Corrections, in order to comply with nationally recognized practices and standards, Corrections has adopted the policy of only having medical professionals administer medications. Corrections is currently contracting with nurses and expending monies budgeted to variable non-food expenses to fulfill this policy.

#### GOVERNOR

Provide \$93,500 PR in 2017-18, and \$65,900 PR in 2018-19 with 9.0 positions annually to provide for the safe and effective administration of controlled medications to Division of Juvenile Corrections youths by trained medical personnel. Staffing includes 4.0 registered nurses and 5.0 licensed practical nurses. The provision includes a transfer of \$527,300 PR in 2017-18, and \$703,100 PR in 2018-19 from variable non-food for contract nursing services to partially fund a total cost of \$620,800 PR in 2017-18, and \$769,000 PR in 2018-19 for the 9.0 positions.

#### DISCUSSION POINTS

1. According to Corrections, medication administration involves knowledge of medication and an understanding of how medications interact with a patient's health status that only a licensed health care professional can provide. When medications are administered there is an expectation that the patient is assessed for ability to take the medication, and some medications require checking the patient's pulse, and ensuring proper orientation of the medications. The nurse also evaluates the patient for the effectiveness of the medication. Patients with significant health needs such as chronic disease or mental health needs will require frequent reassessment of

medications administered.

2. The health care professionals provided under the bill would travel to the location of the patient, assess a patient for the ability to take the medication, administer medication, and provide any necessary follow up care such as evaluating medication effectiveness or side effects. A similar transition of medication administration responsibilities occurred at the female Taycheedah Correctional Institution through the 2007-09 and 2009-11 biennial budgets.

3. Until May, 2016, all medications at Copper Lake School (CLS) and Lincoln Hills School (LHS) were being delivered to the youth by youth counselors (YCs) and youth counselors advanced (YCAAs) (security staff). Nursing staff transcribe orders and also prepare and refill the blister packs of medications for the housing units.

4. In May, 2016, Corrections began implementing policies to have only healthcare professionals (nurses) administer medications at both LHS and CLS. Since May, 2016, medication management has been a hybrid system involving the use of health care professionals and security staff. In the housing unit with the highest percent of youth on medication (DuBois), nursing staff are required to administer all medications. In the other housing units, only senior staff (YCAAs and YCs with more than two years of experience) are permitted to deliver medications. In June, 2016, Corrections hired contracted health care staff (1.0 registered nurse (RN) and 1.0 licensed practical nurse (LPN) each for first and second shifts) to administer medications.

5. As of April, 2017, there were 2.0 contract LPN's and 3.0 contract RN's. Currently only nursing staff are administering medications to CLS housing units and LHS's DuBois housing unit. As of April 28, 2017, LHS had 373 active prescriptions that were being administered on a daily basis while CLS had 94 active prescriptions. Each active prescription may need to be provided up to four times daily.

6. The first medication administration occurs on the housing unit prior to the start of school (which occurs at 7:45 AM), the last administration occurs at approximately 10:30 PM, with two other medication passes during the day. This schedule is maintained seven days per week. In addition, the Department changed the classification of an existing position to an RN, thereby increasing the number of permanent nursing staff at LHS and CLS.

7. To fully transition to utilizing permanent nursing staff to administer medication to all youth at LHS and CLS by October, 2017, a total of 9.0 nursing positions (in addition to the existing 1.0 nursing position) are provided in the bill. These 10.0 positions would provide the equivalent of a 3-3-0 staffing pattern (three on first shift, three on second shift, zero on third shift), seven days per week. Occasionally, the Department may still need to use contract staff, but prefers to have permanent positions to improve consistency and continuity of medication administration to all youth.

8. According to Corrections, in alignment with scope of practice and best practice, LPNs do not practice independently while RNs are allowed to practice independently. The LPN may participate in care of patients with basic health needs, and may, therefore, administer medications. However, patients with complex health needs must be assessed by an RN. It is due to

these reasons that a mixture of RNs and LPNs are being recommended, rather than just LPNs.

9. Given that permanent positions would assist with continuity of care and that this provision is meant to address situations such as a 2016 incident where a juvenile was given the incorrect medication twice, the Committee may wish to include the Governor's recommendation. [Alternative 1] As a result, the Committee could provide \$93,500 PR in 2017-18, and \$65,900 PR in 2018-19 and transfer \$527,300 PR in 2017-18, and \$703,100 PR in 2018-19 from variable non-food for contract nursing services to partially fund a total of \$620,800 PR in 2017-18, and \$769,000 PR in 2018-19 for the 9.0 PR positions. Under this alternative, three nursing staff members would be available to administer medications on first and second shifts seven days a week.

10. Populations at the schools have fluctuated in recent years. Given this variability, a different staffing pattern may be appropriate. For example, 6.0 positions would provide the equivalent of a 2-2-0 staffing pattern seven days per week. Providing a mix of permanent and contract positions would allow Corrections to administer medications, but evaluate if more permanent positions are necessary based on more experience. [Alternative 2] As a result, the Committee could provide \$38,900 PR in 2017-18, and \$20,400 PR in 2018-19 and transfer \$301,400 PR in 2017-18, and \$401,900 PR in 2018-19 from variable non-food for contract nursing services to partially fund a total of \$341,300 PR in 2017-18, and \$422,300 PR in 2018-19 for the 5.0 PR positions. Under this alternative, two nursing staff members would be available to administer medications on first and second shifts seven days a week.

11. Since the juvenile institutions are almost completely funded through PR, using existing PR positions would result in the salary and fringe expenditures being paid through revenues collected from the daily rate charged to counties, the serious juvenile offender appropriation, and the adult contract bed appropriation. Given that Corrections has funded 9.0 RN and LPN contract positions, the Committee may wish to maintain position authority. [Alternative 3] As a result, Corrections would continue to further policy goals through contract positions.

12. Funding and positions provided under the bill add to the PR costs of the juvenile schools. These costs are included in the overall costs used to establish the daily rate charged to counties and the state for placements at the schools. To the extent that PR costs are reduced and estimated populations remain stable, daily rates may decrease. To this end, the Committee could choose to fund either Alternatives 1 or 2 with GPR instead of PR. The Committee may wish to fund 9.0 positions for the 3-3-0 staffing pattern with GPR. [Alternative 4] As a result, the Committee would provide \$620,800 GPR in 2017-18, and \$769,000 GPR in 2018-19 for the 9.0 GPR positions and remove \$527,300 PR in 2017-18, and \$703,100 PR in 2018-19 from variable non-food for contract nursing services. Under this alternative, three nursing staff members would be available to administer medications on first and second shifts seven days a week.

13. General purpose revenue funding of Alternative 2 would provide 5.0 positions for the 2-2-0 staffing pattern with GPR. [Alternative 5] As a result, the Committee would provide \$340,200 GPR in 2017-18, and \$421,700 GPR in 2018-19 for the 5.0 GPR positions. Under this alternative, two GPR-funded nursing staff members would be available to administer medications on first and second shifts seven days a week.

14. The table below shows the effect of providing requested positions on the daily rate, SJO funding, and contract beds for juveniles under 18 with adult sentences:

Alternative	# of Positions	Annual Amount		Bill Modification to Daily Rate		Annual SJO Modification		Annual Contract Bed Modification	
		2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19
1	9 PR	\$93,500	\$65,900	\$0.00	\$0.00	\$0	\$0	\$0	\$0
2	5 PR	38,900	20,400	-0.68	-0.57	-11,700	-11,000	-8,700	-7,200
3	0	-93,500	-65,900	-1.16	-0.82	-20,000	-15,900	-14,900	-10,500
4	9 GPR	620,800	769,000	-6.57	-8.76	-112,700	-169,400	-83,900	-111,900
5	5 GPR	340,200	421,700	-3.75	-5.00	-64,400	-96,700	-47,900	-63,800

### ALTERNATIVES

1. Include the Governor's recommendation to provide \$93,500 PR in 2017-18, and \$65,900 PR in 2018-19 and transfer \$527,300 PR in 2017-18, and \$703,100 PR in 2018-19 from variable non-food for contract nursing services to partially fund a total of \$620,800 PR in 2017-18, and \$769,000 PR in 2018-19 with 9.0 PR positions annually to provide for the safe and effective administration of controlled medications to Division of Juvenile Corrections youths by trained medical personnel.

ALT 1	Change to Base		Change to Bill	
	Funding	Positions	Funding	Positions
PR	\$159,400	9.00	\$0	0.00

2. Provide \$38,900 PR in 2017-18, and \$20,400 PR in 2018-19 and transfer \$301,400 PR in 2017-18, and \$401,900 PR in 2018-19 from variable non-food for contract nursing services to partially fund a total of \$341,300 PR in 2017-18, and \$422,300 PR in 2018-19 for the 5.0 PR positions annually to provide for the safe and effective administration of controlled medications to Division of Juvenile Corrections youths by trained medical personnel.

ALT 2	Change to Base		Change to Bill	
	Funding	Positions	Funding	Positions
PR	\$59,300	5.00	-\$100,100	- 4.00

3. Maintain current law.

ALT 3	Change to Base		Change to Bill	
	Funding	Positions	Funding	Positions
PR	\$0	0.00	-\$159,400	- 9.00

4. Provide \$620,800 GPR in 2017-18, and \$769,000 GPR in 2018-19 for the 9.0 GPR positions and remove \$527,300 PR in 2017-18, and \$703,100 PR in 2018-19 from variable non-

food for contract nursing services.

ALT 4	Change to Base		Change to Bill	
	Funding	Positions	Funding	Positions
GPR	\$1,389,800	9.00	\$1,389,800	9.00
PR	<u>0</u>	<u>0.00</u>	<u>- 1,389,800</u>	<u>- 9.00</u>
Total	\$1,389,800	9.00	\$0	0.00

5. Provide \$340,200 GPR in 2017-18, and \$421,700 GPR in 2018-19 for the 5.0 GPR positions and remove \$301,400 PR in 2017-18, and \$401,900 PR in 2018-19 from variable non-food for contract nursing services.

ALT 5	Change to Base		Change to Bill	
	Funding	Positions	Funding	Positions
GPR	\$751,000	5.00	\$761,900	5.00
PR	<u>0</u>	<u>0</u>	<u>- 703,300</u>	<u>- 9.00</u>
Total	\$751,000	5.00	\$58,600	- 4.00

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