1.0 **PURPOSE**

To identify patients with chronic diseases and enroll the patient in a chronic disease management program to decrease the frequency and severity of the symptoms, foster improved outcomes and prevent disease progression and complication.

2.0 **REFERENCES AND DEFINITIONS**

1. References

   a. Hawaii Revised Statutes; Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties.


2. Definitions

   a. **Chronic Disease**: is an illness or a condition that affects an individual’s well being for an extended period of time, usually at least six (6) months, and generally is not curable but can be managed to provide optimum function within any limitations the condition imposes on the individual.

   b. **Chronic Disease Program**: incorporates a treatment plan and regular clinic visits. The provider monitors the patient’s progress during clinic visits and, when necessary, changes the treatment. The program also includes patient education related to the condition and symptom management.

   c. **Clinical Practice Guidelines**: systematically developed, science based statements designed to assist the provider and patient with decisions about appropriate health care for specific clinical circumstances. These guidelines are used to assist in clinical decision making, assess and assure the quality of care, educate individuals and groups about clinical disease, guide the allocation of health care resources and reduce the risk of legal liability.

   d. **National Practice Guidelines**: guidelines presented by national professional organizations and accepted experts in the respective medical field.
e. National Clinical Practice Guidelines: are those promulgated by national professional organizations and accepted by experts in the respective medical field.

3.0 POLICY

Patients with chronic diseases shall be identified and enrolled in a chronic disease program that through scheduled care, fosters a decrease in severity and frequency of symptoms, the prevention of disease progression and improved function.

4.0 PROCEDURES

.1 The Medical Director establishes and annually approves clinical protocols for chronic and preventive disease management consistent with national clinical practice guidelines. These clinical protocols shall include those conditions with statistically significant occurrence rates (equal to or above national correctional occurrence rates) or are of specific interest to Hawaii health care practice and shall include, but are not limited to the following:
   a. Asthma
   b. Diabetes
   c. Hepatitis C
   d. High Blood Cholesterol
   e. Human Immunodeficiency Virus (HIV)
   f. Hypertension
   g. Major Mental Illnesses
   h. Seizure disorders
   i. Tuberculosis

.2 Documentation in the medical record confirms that clinicians are following disease protocols by:
   a. Clinically justifying any deviation from the protocol.
   b. Indicating the type and frequency of diagnostic testing and therapeutic regimens (e.g., diet, exercise, medication).
   c. Monitoring the patient's condition (e.g., poor, fair, good) and status (e.g., stable, improving, deteriorating) and taking appropriate action to improve patient outcomes.
   d. The provider determines the frequency of medical follow-up based on disease control.
.3 Chronic Disease are listed on the master problem list.

.4 The facility maintains a list of chronic care patients.

5.0 **SCOPE**

This policy and procedures applies to all correctional facilities and their assigned personnel.

**APPROVAL RECOMMENDED:**

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<th>Acting Medical Director</th>
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<td>David Saldaña, MD</td>
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