

APPENDIX 1

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Goal 1 - Timely Access to Health Care	Location
Objective 1.1. Redesign and Standardize Screening and Assessment Processes at Reception/Receiving and Release	
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Action 1.1.2. By January 2011, implement new processes at each of the major reception centers.	Institutions
Action 1.1.3. By January 2010, begin using the new medical classification system at each reception center prison.	Statewide Initiative
Action 1.1.4. By January 2011, complete statewide implementation of the medical classification system throughout CDCR institutions.	Statewide Initiative
Objective 1.2. Establish Staffing and Processes for Ensuring Health Care Access at Each Institution	
Action 1.2.1. By January 2009, the Receiver will have concluded preliminary assessments of custody operations and their influence on health care access at each of CDCR's institutions and will recommend additional staffing, along with recommended changes to already established custody posts, to ensure all patient-inmates have improved access to health care at each institution.	Statewide Initiative
Action 1.2.2. By July 2011, the Receiver will have fully implemented Health Care Access Units and developed health care access processes at all CDCR institutions.	Institutions
Objective 1.3. Establish Health Care Scheduling and Patient-Inmate Tracking System	
Action 1.3.1. Work with CDCR to accelerate the development of the Strategic Offender Management System with a scheduling and inmate tracking system as one of its first deliverables.	Statewide Initiative
Objective 1.4. Establish A Standardized Utilization Management System	
Action 1.4.1. By May 2010, open long-term care unit.	Statewide Initiative
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Goal 2. Establish A Prison Medical Program Addressing The Full Continuum of Health Care Services	
Objective 2.1. Redesign and Standardize Access and Medical Processes for Primary Care	
Action 2.1.1. By December 2009, complete the redesign of episodic care processes, forms, and staffing models.	Institutions
Action 2.1.2. By July 2010, implement the new episodic care system in all institutions.	Institutions
Objective 2.2. Improve Chronic Care System to Support Proactive, Planned Care	
Action 2.2.1. Implement an inter-disciplinary team-based Primary Care Model in all institutions by December 2009. Implement a Chronic Disease program within the framework of the Primary Care Model by December 2010.	Institutions
Objective 2.3. Improve Emergency Response to Reduce Avoidable Morbidity and Mortality	
Action 2.3.1. Immediately finalize, adopt and communicate an Emergency Medical Response System policy to all institutions.	Institutions
Action 2.3.2. By July 2009, develop and implement certification standards for all clinical staff and training programs for all clinical and custody staff.	Institutions
Action 2.3.3. By January 2009, inventory, assess and standardize equipment to support emergency medical response.	Institutions
Objective 2.4. Improve the Provision of Specialty Care and Hospitalization to Reduce Avoidable Morbidity and Mortality	
Action 2.4.1. By June 2009, establish standard utilization management and care management processes and policies applicable to referrals to specialty care and hospitals.	Statewide Initiative
Action 2.4.2. By October 2010, establish on a statewide bases approved contracts with speciality care providers and hospitals.	Statewide Initiative
Action 2.4.3. By November 2009, ensure specialty care and hospital providers' invoices are processed in a timely manner.	Statewide Initiative

Goal 3. Recruit, Train and Retain a Professional Quality Medical Care Workforce	
Objective 3.1. Recruit Physicians and Nurses to Fill Ninety Percent of Established Positions	
Action 3.1.1. By January 2009, fill 90% of nursing positions.	Institutions
Action 3.1.2. By January 2009, fill 90% of physician positions.	Institutions
Objective 3.2 Establish Clinical Leadership and Management Structure	
Action 3.2.1. By January 2010, establish and staff new executive leadership positions.	Statewide Initiative
Action 3.2.2. By March 2010, establish and staff regional leadership structure.	Statewide Initiative
Objective 3.3. Establish Professional Training Programs for Clinicians	
Action 3.3.1. By January 2010, establish statewide organizational orientation for all new health care hires	Statewide Initiative
Action 3.3.2. By January 2009, win accreditation for CDCR as a CME provider recognized by the Institute of Medical Quality and the Accreditation Council for Continuing Medical Education.	Statewide Initiative
Goal 4. Implement Quality Improvement Programs	
Objective 4.1. Establish Clinical Quality Measurement and Evaluation Program	
Action 4.1.1. By July 2011, establish sustainable quality measurement, evaluation and patient safety programs.	Statewide Initiative
Action 4.1.2. By July 2009, work with the Office of Inspector General to establish an audit program focused on compliance with Plata requirements.	Statewide Initiative
Objective 4.2. Establish a Quality Improvement Program	
Action 4.2.1. By January 2010, train and deploy existing staff -- who work directly with institutional leadership -- to serve as quality advisors and develop model quality improvement programs at selected institutions; identify clinical champions at the institutional level to implement continuous quality improvement locally, and develop a team to implement a statewide/systems-focused quality monitoring/measurement and improvement system under the guidance of an interdisciplinary Quality Management Committee.	Statewide Initiative
Action 4.2.2. By September 2009, establish a Policy Unit responsible for overseeing review, revision, posting and distribution of current policies and procedures.	Statewide Initiative
Action 4.2.3. By January 2010, implement process improvement programs at all institutions involving trained clinical champions and supported by regional and statewide quality advisors.	Institutions
Objective 4.3. Establish Medical Peer Review and Discipline Process to Ensure Quality of Care	
Action 4.3.1. By July 2008, working with the State Personnel Board and other departments that provide direct medical services, establish an effective Peer Review and Discipline Process to improve the quality of care.	Statewide Initiative
Objective 4.4. Establish Medical Oversight Unit to Control and Monitor Medical Employee Investigations	
Action 4.4.1. By January 2009, fully staff and complete the implementation of a Medical Oversight Unit to control and monitor medical employee investigations.	Statewide Initiative
Objective 4.5. Establish a Health Care Appeals Process, Correspondence Control and Habeas Corpus Petitions Initiative	
Action 4.5.1. By July 2008, centralize management over all health care patient-inmate appeals, correspondence and habeas corpus petitions.	Institutions/Statewide
Action 4.5.2. By August 2008, a task force of stakeholders will have concluded a system-wide analysis of the statewide appeals process and will recommend improvements to the Receiver.	Statewide Initiative
Objective 4.6. Establish Out-of-State, Community Correctional Facilities and Re-entry Facility Oversight Program	
Action 4.6.1. By July 2008, establish administrative unit responsible for oversight of medical care given to patient-inmates housed in out-of-state, community correctional or re-entry facilities.	Statewide Initiative
Goal 5. Establish Medical Support / Allied Health Infrastructure	

Objective 5.1 Establish a Comprehensive, Safe and Efficient Pharmacy Program	
Action 5.1.1. Continue developing the drug formulary for the most commonly prescribed medications.	Statewide Initiative
Action 5.1.2. By March 2010, improve pharmacy policies and practices at each institution and complete the roll-out of the GuardianRx® system.	Institutions
Action 5.1.3. By May 2010, establish a central-fill pharmacy.	Statewide Initiative
Objective 5.2. Establish Standardized Health Records Practice	
Action 5.2.1. By November 2009, create a roadmap for achieving an effective management system that ensures standardized health records practice in all institutions.	Institutions/Statewide
Objective 5.3. Establish Effective Radiology and Laboratory Services	
Action 5.3.1. By August 2008, decide upon strategy to improve medical records, radiology and laboratory services after receiving recommendations from consultants.	Institutions
Objective 5.4. Establish Clinical Information Systems	
Action 5.4.1. By September 2009, establish a clinical data repository available to all institutions as the foundation for all other health information technology systems.	Institutions
Objective 5.5. Expand and Improve Telemedicine Capabilities	
Action 5.5.1. By September 2008, secure strong leadership for the telemedicine program to expand the use of telemedicine and upgrade CDCR's telemedicine technology infrastructure.	Institutions
Goal 6. Provide for Necessary Clinical, Administrative and Housing Facilities	
Objective 6.1. Upgrade administrative and clinical facilities at each of CDCR's 33 prison locations to provide patient-inmates with appropriate access to care.	
Action 6.1.1. By January 2010, complete assessment and planning for upgraded administrative and clinical facilities at each of CDCR's 33 institutions.	statewide Initiative
Action 6.1.2. By January 2012, complete construction of upgraded administrative and clinical facilities at each of CDCR's 33 institutions.	Statewide Initiative
Objective 6.2. Expand administrative, clinical and housing facilities to serve up to 10,000 patient-inmates with medical and/or mental health needs.	
Action 6.2.1. Complete pre-planning activities on all sites as quickly as possible.	Statewide Initiative
Action 6.2.2. Stockton Site Environmental Impact Report (EIR) Status.	Statewide Initiative
Action 6.2.3. By July 2013, complete execution of phased construction program.	Statewide Initiative
Objective 6.3. Complete Construction at San Quentin State Prison	
Action 6.3.1. By December 2008, complete all construction except for the Central Health Services Facility.	Statewide Initiative
Action 6.3.2. By April 2010, complete construction of the Central Health Services Facility.	Statewide Initiative

**RECEIVER'S TURNAROUND PLAN OF ACTION MATRIX
ENTERPRISEWIDE PROJECT DEPLOYMENT as of August 31 2011**

STATEWIDE	Description	Status	Completion Date
Goal 1 - Timely Access to Health Care			
Objective 1.1 Redesign and Standardize Screening and Assessment Processes at Reception/Receiving and Release			
Access to Care - Reception Center <i>Action 1.1.1</i>	Develop standardized reception screening processes and begin pilot implementation.	Completed	Jan-2009
Access to Care - Reception Center <i>Action 1.1.3</i>	Begin using the new medical classification system at each reception center prison.	Completed	Jan-2010
Access to Care - Reception Center <i>Action 1.1.4</i>	Complete statewide implementation of the medical classification system throughout CDCR institutions.	Completed	Jan-2011
Objective 1.2 Establish Staffing and Processes for Ensuring Health Care Access at Each Institution			
Access to Care - Access Units, <i>Action 1.2.1</i>	Preliminary assessments of custody operations and their influence on health care access at each of CDCR's institutions and recommend additional staffing.	Completed	Jan-2009
Nurse Staffing Assessment <i>Action 1.2.1</i>	Fiscal approval of budget for recommended nursing positions (classification mix and volume) to provide constitutional care to persons in custody.	Completed	Jan-2009
Objective 1.3 Establish Health Care Scheduling and Patient-Inmate Tracking System			
Access to Care - SOMS <i>Action 1.3.1</i>	Work with CDCR to accelerate the development of the Strategic Offender Management System with a scheduling and inmate tracking system as one of its first deliverables.	In Progress with CDCR	Dec-2013
Access to Care - Health Care Scheduling System (HCSS) <i>Action 1.3.1</i>	Schedule medical, dental, and mental health care appointments for offenders based upon mandated health care requirements, offender requests, referrals, medical orders, and on-going treatment plans.	In Progress	Apr-2013
Objective 1.4 Establish a Standardized Utilization Management System			
Access to Care - Facility pilot <i>Action 1.4.1</i>	Open long-term care units at one facility as a pilot project to assist in developing plans for other long-term chronic care facilities.	Completed	May-2010
Goal 2 - Continuum of Health Care Services			
Objective 2.4 Improve the Provision of Specialty Care and Hospitalization to Reduce Avoidable Morbidity and Mortality			
Specialty Care <i>Action 2.4.1</i>	Establish standard utilization management and care management processes and policies applicable to referrals to specialty care and hospitals.	Completed	Jun-2009

	CPHCS Medical Contracting <i>Action 2.4.2</i>	Establish a Statewide basis approved contracts with specialty care providers and hospitals.	Completed	Oct-2010
	Specialty Care <i>Action 2.4.3</i>	Ensure specialty care and hospital providers' invoices are processed in a timely manner.	Completed	Nov-2009
Goal 3 - Medical Care Workforce				
Objective 3.2 Establish Clinical Leadership and Management Structure				
	New Executive Leadership <i>Action 3.2.1</i>	Establish and staff new executive leadership positions.	Completed	Jan-2010
	Regional Leadership Structure <i>Action 3.2.2</i>	Establish and staff regional leadership structure.	Completed	Mar-2010
Objective 3.3 Establish Professional Training Programs and Clinicians				
	Statewide Clinical Orientation <i>Action 3.3.1</i>	Establish statewide organizational orientation for all new health care hires and institution-specific clinical orientation through a nursing preceptor or proctoring program.	Completed	Jan-2010
	Continuing Medical Education (CME) Accreditation <i>Action 3.3.2</i>	Win accreditation for CDCR as a CME provider recognized by the Institute of Medical Quality and the Accreditation Council for Continuing Medical Education.	Completed	Jan-2009
Goal 4 - Quality Improvement Programs				
Objective 4.1 Establish Clinical Quality Measurement and Evaluation Program				
	Quality Measurement, Evaluation and Patient Safety <i>Action 4.1.1</i>	Establish a sustainable quality measurement, evaluation and patient safety programs.	Ongoing	Jul-2011
	Audit Program <i>Action 4.1.2</i>	Work with the Office of Inspector General to establish an audit program focused on compliance with Plata requirements. Phase I - Program Development & Pilot Implementation Phase II - Statewide Roll-Out & Implementation	Phase I - Completed Phase II - Completed	Phase I - July 2009 Phase II - July 2010
Objective 4.2 Establish a Quality Improvement Program				
	Quality Management <i>Action 4.2.1</i>	Train and deploy a cadre of quality improvement advisors to develop model quality improvement programs at selected institutions.	Ongoing	Jan-2010
	Policy Unit <i>Action 4.2.2</i>	Establish a Policy Unit responsible for overseeing review, revision, posting and distribution of current policies and procedures.	Completed	Sep-2009
Objective 4.3 Establish Medical Peer Review and Discipline Process to Ensure Quality of Care				
	Peer Review Process <i>Action 4.3.1</i>	Work with the State Personnel Board and other departments that provide direct medical services, establish an effective Peer Review and Discipline Process to improve the quality of care.	Completed	Jul-2008
Objective 4.4 Establish Medical Oversight Unit to Control and Monitor Medical Employee Investigations				

	Medical Oversight Unit <i>Action 4.4.1</i>	Fully staff and complete the implementation of a Medical Oversight Unit to control and monitor medical employee investigations.	Completed	Jan-2009
Objective 4.5 Establish a Health Care Appeals Process, Correspondence Control and Habeas Corpus Petitions				
	Health Care Appeals, Correspondence and Habeas Corpus Petitions <i>Action 4.5.1</i>	Centralize management over all health care patient-inmate appeals, correspondence and habeas corpus petitions.	Completed	Jul-2008
	Statewide Appeals Process Analysis <i>Action 4.5.2</i>	A task force of stakeholders will have concluded a system-wide analysis of the statewide appeals process and will recommend improvements to the Receiver.	Completed	Aug-2008
Objective 4.6 Establish Out-of-State, Community Correctional Facilities and Re-Entry Facility Oversight Program				
	Out of State Program <i>Action 4.6.1</i>	Establish administrative unit responsible for oversight of medical care given to patient-inmates housed in out-of-state, community correctional or re-entry facilities.	Completed	Jul-2008
Goal 5 - Medical Support Infrastructure				
Objective 5.1 Establish a Comprehensive, Safe and Efficient Pharmacy Program				
	Drug Formulary <i>Action 5.1.1</i>	Continue developing the drug formulary for the most commonly prescribed medications.	Ongoing	Continuous project
	Pharmacy: Central Fill <i>Action 5.1.3</i>	Consolidate orders, automate distribution of medications, reduce cost and waste while improving tracking of orders and increasing patient utilization.	Completed	May-2010
	Pharmacy: eMAR <i>Action 5.1.3</i>	Improve patient safety, efficient medication administration and documentation while increasing patient medication tracking, inventory control, patient utilization and compliance data.	Project in Initiation Phase	On hold due to budgetary reasons
Objective 5.2 Establish Standardized Health Records Practice				
	Health Information Management (HIM) <i>Action 5.2.1</i>	Contract for health records management and staffing functions to transition the current HIM operation to one based on industry best practices and standards applicable to the correctional environment.	Completed with ongoing evaluation and improvements	Nov-2009
	Claims Management and Invoice Processing (TPA) <i>Action 5.2.1</i>	Provide a healthcare claims processing system that is typically found in commercial or public health plans. The system will improve the quality, efficiency, and timeliness of payments to health care vendors serving CDCR's patient population, while also implementing effective cost management.	Completed See 2.4.3	Nov-2009
Goal 6 - Facilities				
Objective 6.1 Upgrade administrative and clinical facilities at each of CDCR's 33 prison locations to provide patient-inmates with appropriate access to care				

	Complete Assessment for Upgraded and Administrative Clinical Facilities <i>Action 6.1.1</i>	Complete assessment and planning for upgraded administrative and clinical facilities at each of CDCR's 33 institutions.	In Progress	Jan-2010
	Complete Construction Upgraded and Administrative Clinical Facilities <i>Action 6.1.2</i>	Complete construction of upgraded administrative and clinical facilities at each of CDCR's 33 institutions.	In Progress	Jan-2012
Objective 6.2 Expand administrative, clinical and housing facilities to serve up to 10,000 patient-inmates with medical and/or mental health needs.				
	Expand housing Facilities <i>Action 6.2.1</i>	Complete pre-planning activities on all sites as quickly as possible.	In Progress	As soon as possible
	Begin Construction at First Site <i>Action 6.2.2</i>	Begin construction at first site.	In Progress	Feb-2009
	Phase Construction Program <i>Action 6.2.3</i>	Complete execution of phased construction program.	Delayed	Jul-2013
Objective 6.3 Complete Construction at San Quentin State Prison				
	San Quentin Central Health Services <i>Action 6.3.1</i>	Complete all construction except for the Central Health Services Facility.	Completed	Dec-2008
	San Quentin Central Health Services Facility <i>Action 6.3.2</i>	Complete construction of the Central Health Services Facility.	Completed	Apr-2010