

TABLE OF CONTENTS

INTRODUCTION

YOUR RIGHTS CONCERNING YOUR HEALTH CARE

- Disability Placement Program
- Reasonable Accommodation
- Health Care Appliances

MAKING DECISIONS ABOUT YOUR HEALTH CARE

- Health Care Programs and Services
- Emergency Health Care
- Reception Center Screenings and Evaluations
 - Pregnancy Testing and Services
 - Developmental Disability Program Screening
- Medication Information
 - Getting Your Medications
 - Medication Refusals
 - Medication Refills
 - Medication Renewals
- Accessing Routine Medical Care: CDCR Form 7362
 - Priority Ducats
- Diagnostic Services
- Infectious Disease Prevention
- Annual TB Testing Evaluation
- HIV and HIV Counseling
- Preventive Services
- Chronic Disease Management Program
 - Hepatitis C Virus Chronic Care Program (HCV CCP)
- Specialty Consultations
- Physical Therapy
- Dietary Services and Counseling
- Health Care Education
- Mental Health Services
- Placement in the MHSDS
 - Mental Health Crises
 - Self-Referrals
 - The Treatment Program
- Dental Services
- Palliative Care
- Advanced Directive for Health Care
- Physician Orders For Life Sustaining Treatment (POLST)
- Health Care Related Appeals
- Release of Health Care Information

Patient-Inmate Orientation Handbook to Health Care Services

INTRODUCTION

This book will tell you about the health care available to you and how you can ask for those services. We give medical, dental, and mental health care. We give you health care at all times.

All CDCR institutions have clinics and special housing units that give medical, dental, public health, and mental health care. CDCR also has nursing, laboratory, dietary, pharmaceutical, and diagnostic imaging (x-ray) services for your care.

We will take care of you no matter where you are housed.

We have contracts with local community hospitals and special medical providers to give you care that is not available in institutions.

YOUR RIGHTS CONCERNING YOUR HEALTH CARE

You have the right to privacy, access to care and the right to refuse medical procedures. These rights are the same as the rights you have outside the institution. However, security regulations may limit some rights.

You have the right:

- To medical treatment or accommodations, regardless of race, creed, age, gender, sexual orientation, religion, disability, education, economic standing or national origin.
- To medical services that are reasonable and needed to protect your life, to prevent and to treat significant illness and disability, and to ease serious pain.
- To be treated with regard, respect, and full recognition of your dignity and individuality, including privacy in treatment and in care of personal needs, when not in conflict with security and custodial policies.
- To not be subjected to verbal or physical abuse of any kind from employees or independent contractors.
- To be free from mental and physical abuse.
- To confidential treatment of your personal and health care records consistent with the *Health Insurance Portability and Accountability Act* (HIPAA) of 1996 and the *California Medical Information Act* or as required by law or third party payment contract, copies of which are in the law library.
- To approve or refuse the release of your records to any individual outside of CDCR, except in the case of transfer to another health care facility.
- To make decisions about your health care, such as:
 - Using advance directives to document these decisions.
 - Executing a power of attorney for health care.
 - Choosing someone to make your health care decisions if you become incapacitated.
- To know from the health care staff responsible for your care about your diagnosis, treatment, and prognosis (if known)

Patient-Inmate Orientation Handbook to Health Care Services

- To discuss your health care treatment options with your health care provider, if clinically appropriate.
- To, if need be, have your legally authorized representative discuss your medical treatment options with your Primary Care Provider (PCP), as long as the safety and security of the institution is not affected.
- To talk to, and understand, health care services staff during health care contact or use an interpreter, if need be.
- To reasonably take part in decisions involving your health care, based on a clear explanation of your condition, all proposed technical procedures, the possibility of any risk of death or serious side effects, problems related to recovery, the odds of success, and medically reasonable alternatives.
- To not be given any procedure without your voluntary, competent, and understanding consent or the consent of your legally authorized representative, unless you cannot provide consent and treatment is essential to preserve life or limb.
- To give informed consent or to refuse any treatment or procedure, except as required by law; TB testing is required by law. (Mental health treatment is also sometimes required by law if you should become gravely disabled, dangerous to yourself or dangerous to others. If mental health staff believes that you need treatment, you may be placed and housed in the mental health program, even if you refuse to participate in mental health services.)
- To give informed consent or to refuse any treatment or procedure or participation in test research.
- To refuse convulsive treatment such as electroconvulsive treatments and treatments of a mental condition that depends on the induction of a convulsion by any means, or insulin coma treatment.
- To refuse psychosurgery as deemed in Section 5325 of California's *Welfare and Institutions Code*, i.e. "Informed consent by the patient-inmate (if competent) or his/her representative shall be obtained prior to any procedure and the consent shall be made voluntarily..." (A complete copy of the Welfare and Institutions Code is available to you in the law library.)
- To be free from chemical (except in emergencies), clinical, and treatment restraints, **except** when necessary to protect you or others from injury.
- To review your health record upon request, consistent with and subject to the constraints provided by statutory and case law.
- To be informed of institution rules and regulations regarding your being a patient-inmate and to be fully informed about and provided access to grievance forms and procedures.
- To expect quick and appropriate response from health care staff to all health care related appeals you file on CDCR Form 602-HC, *Inmate/Parolee Health Care Appeal Form*, and CDCR Form 1824, *Reasonable Modification or Accommodation Request*.

Your rights, as listed above, can only be denied or limited for good cause. Care can only be denied or limited for reasonable security procedures or as authorized by law or

Patient-Inmate Orientation Handbook to Health Care Services

regulation. Your attending Primary Care Provider (Physician, Nurse Practitioner, or Physician's Assistant) or other person lawfully authorized to prescribe care must document in your electronic unit health record the reasons your rights were denied or limited.

DISABILITY PLACEMENT PROGRAM (DPP)

The *Americans with Disabilities Act* (ADA) requires that you be given the right housing and program opportunities regardless of any disability. If you have a permanent disability, can't hear, can't see, can't talk, and/or can't walk, you may be eligible for placement in the DPP. The DPP helps patient-inmates get the right housing and program opportunities consistent with their disabilities. DPP inmates can be housed in special institutions that are set up for patient-inmates with different levels of disabilities.

REASONABLE ACCOMMODATION: CDCR Form 1824 Reasonable Modification or Accommodation Request

If you can't see, can't hear and/or can't walk, you can ask for reasonable accommodations with CDCR Form 1824. You can use this form for an appeal alleging disability related discrimination.

You can get Form 1824 in the housing units and the library. Write down your disability and describe what you want as a reasonable accommodation. Then send the form to the Health Care Appeal Coordinator (HCAC) office. You may ask for help in filling out the form.

HEALTH CARE APPLIANCES

Health care appliances are things such as:

- Eyeglasses
- Artificial eyes
- Dentures
- Artificial limbs
- Orthopedic braces and shoes
- Hearing aids

Your need for an appliance must be based on medical necessity, as described in Title 15. This need will be determined by a clinician. You will not be denied necessary appliances, repairs or maintenance because you are poor. You will be allowed to keep your health care appliance unless:

- It poses a safety or security risk.
- A CCHCS doctor or dentist decides you no longer need it.
- You have tampered with the appliance.

MAKING DECISIONS ABOUT YOUR HEALTH CARE

HEALTH CARE PROGRAMS AND SERVICES

Health care services are available at the institutions all day, every day. After regular clinic hours, services are available from on-site health care staff or providers on call, if needed. At the General Acute Care Hospitals (GACH), the Medical Officer of the Day (MOD) is available at the prison for your care at all times.

*You will **be assigned to a specific medical care team at the institution. Usually, patients are assigned to a care team by yard, last name, or last two numbers of their CDCR number. Your care team is responsible for making sure you get the medical care you need, and they work closely with other health care staff to support you when you need other types of care.***

EMERGENCY HEALTH CARE

Emergency care is provided 24 hours a day. Unscheduled or non-emergency medical services may have a \$5.00 (five dollar) co-payment charge per Title 15. Medical emergencies should be reported to any staff member right away.

An emergency is a medical, dental, or mental health issue which, **as determined by health care staff**, requires an immediate exam and treatment to prevent death, severe or permanent disability, or to ease disabling pain.

If you need medical help or feel you have a medical emergency, immediately ask for any staff. If need be, custody staff will secure the area to allow emergency medical responders access to you. If you appear to need health care right now, we will take you to the emergency treatment area.

RECEPTION CENTER SCREENINGS AND EVALUATIONS

You will get this Handbook during your Reception Center (RC) screening process. This handbook is available in each institution's law library. Health care staff will ask you questions about your health history and will order any necessary medicine, blood and urine tests. You will have a physical examination. If other tests are needed, they will be ordered by the doctor.

At the RC, you will be evaluated for tuberculosis (TB). You may be required to have a TB Skin Test (TST). It is placed on your forearm and read by health care staff. If you have proof of a prior positive TST, a chest x-ray will be ordered. You will be:

- Tested for Sexually Transmitted Diseases
- Tested for Developmental and Physical Disabilities
- Given a Mental Health screening
- Given a Dental screening.

Patient-Inmate Orientation Handbook to Health Care Services

If you are taking prescription medicine when you arrive at the RC, a doctor will decide if you still need it. If the doctor decides that you should keep taking your medicine, he or she will order it.

Pregnancy Testing and Services

If you are a female inmate less than 60 years old, you will be tested for pregnancy at the Reception Center. If you are pregnant, you will get pre-natal (before birth) and post-natal (after birth) care at your institution. Your baby will be born at an outside hospital.

Developmental Disability Program (DDP) Screening

You will be screened for developmental disabilities at the reception center. DDP may be recommended by the health care staff. Screening consists of testing your knowledge, and if necessary, your reasoning skills, and your ability to adapt to different situations. The DDP places patient-inmates in the correct housing and ensures that patient-inmates receive support meeting their basic needs and understand CDCR rules.

MEDICATION INFORMATION

Getting Your Medications

Every institution delivers medicines up to four times per day. Upon arrival at your institution, you will be told where your medicines can be picked up. Your medicines will be continued as ordered if you are transferred to another facility.

You may be prescribed Keep-On-Person (KOP) medicines. You have the right to the medicines prescribed to you by your doctor. The medicine **MUST** be kept in the ORIGINAL package that was given to you. Any pills not in the original package that cannot be identified by custody will be taken and disposed of.

Only doctors (including psychiatrists, dentists, and podiatrists) nurse practitioners, and physician's assistants can prescribe medicine. Medicines are delivered to you by:

- Directly Observed Therapy (DOT): Appropriately licensed health care staff will visually check your mouth to make sure you swallowed the medicine.
- Nurse Administered (NA) Therapy: A nurse will watch you take your medicine.
- Self-Administered: You are given your medicine along with instructions from your doctor about when and how to take it.

Medication Refusals

It is considered refusing medicine if:

- You don't take your medicine at the cell front.
- You don't take your medicine at the pill line.
- You don't show up at the pill line without a good reason.

Medication Refills

"Keep-on-Person" (KOP) medicines are ones that the prescriber believes you can take by yourself. You must be able to show a current label for each KOP medicine. You may be

Patient-Inmate Orientation Handbook to Health Care Services

asked to return inhalers and pill containers before getting refills. Refilling of KOP medicines may occur by:

- Filling out a CDCR Form 7362.
- Nursing writing up a refill request.
- An auto refill process.

Refill on demand may be used for medicine that you don't take every day, but only when you need it. The nurse will tell you when to pick up your refill at the pill line.

Medication Renewals

Your doctor should have follow-up visits already set up for you before your KOP medicines expire. If not, it is your responsibility to tell your doctor.

ACCESSING ROUTINE MEDICAL CARE: CDCR Form 7362 *Health Care Services Request*

You may see a nurse within 24 hours on weekdays, simply fill out a Form 7362 and place it in one of the medical locked boxes.

You can get the form:

- In the housing units
- In the clinics
- At the Reception Centers
- From any health care staff

Health care or custody staff will help you fill this form out or fill it out for you, if you can't. This form is confidential. Custody staff never sees what you have written. Other inmates never see what you have written.

Priority Ducats

A ducat is your pass to your health care appointment. It is your duty to report to health care (medical, dental, and mental health) appointments at the date and time written on the ducat. If necessary, custody staff will escort you to your appointment.

DIAGNOSTIC SERVICES

Your doctor may decide that x-rays, blood tests and other tests are needed and order them. You may have to go to the lab to have these tests done. You may be given instructions on collecting urine, feces, or spit for tests. It is in your best interest to follow the instructions carefully. Failing to follow instructions could cause delay in your receiving necessary treatment. You will be told of your test results. You will be escorted by correctional officers for any travel outside of an institution.

INFECTIOUS DISEASE PREVENTION

Patient-Inmate Orientation Handbook to Health Care Services

Infectious diseases can be serious problems for inmates. Not only can you catch a serious illness, like TB or Hepatitis C, but you can give it to friends or family members during visits or when you leave prison.

Ways not to get a disease from someone else:

- Do not share ANY needles (such as for tattooing or piercing)
- Do not have unprotected sexual contact
- Do not share eating utensils
- Do not share drug paraphernalia (such as straws to snort cocaine or needles)
- Do not share razors, nail clippers, and toothbrushes.

ANNUAL TB TESTING/EVALUATION

The law requires that you have a TB test when you enter prison and then every year after that. This is mandatory testing you cannot refuse. If you do not take the test, staff will write in your file your refusal and you will be tested involuntarily. It's in your best interest to take the test. If your test shows positive, you will be examined and given a chest x-ray if necessary.

HIV AND HIV COUNSELING

HIV is the virus that causes AIDS. Having HIV does not mean that you have AIDS right now. However, if left untreated, HIV infection can become AIDS. HIV is transmitted through blood, and it attacks and destroys the disease-fighting cells of the immune system. Certain behaviors are high-risk for getting the virus, such as:

- Unsafe sex practices
- Sharing needles
- Getting a tattoo.

You do not have to agree to take an HIV test. You can speak with a doctor before having an HIV test to get more information. If you test negative for HIV, it is still best that you continue to be tested every so often.

If you feel you may have been exposed to HIV, ask to be tested. If you test positive, enrollment and treatment in the HIV Chronic Care Program may be needed. You will be talked to about your test results in a private setting by a:

- Doctor
- Psychiatrist
- Psychologist
- Licensed clinical social worker

To be tested for HIV, fill out CDCR Form 7362. You can use the same form to see an HIV counselor. After you have filled out the form, you need to put it in the medical locked box or give it to any health care staff.

PREVENTIVE SERVICES

Preventive services include:

Patient-Inmate Orientation Handbook to Health Care Services

- Cancer screening strategies
- Immunizations
- Health education or counseling

The CCHCS provides recommendations on a yearly basis for preventive clinical services, including recommended vaccinations.

CHRONIC DISEASE MANAGEMENT PROGRAM (CDMP)

Chronic diseases are medical problems that don't go away.

Some common chronic diseases are:

- High blood pressure
- Heart disease
- Diabetes
- Hepatitis C
- TB
- HIV
- Asthma or emphysema
- Seizure

If you are enrolled in the CDMP:

- You will have routine appointments.
- You will NOT pay any co-pay.
- You are responsible for helping take care of yourself, such as taking your medicine and changing what you eat.

Identification and Enrollment

The three ways you may be enrolled in the CDMP are:

- At the Reception Center.
- At the Receiving and Release (R&R) bus screening for new arrivals.
- By a referral from your doctor or when your medicines or tests are reviewed.

Your first health care visit for CDMP will include a complete medical history and physical exam by a doctor. This exam will focus on important past health information, physical findings, and test results.

If your past health information is needed, you will be asked to sign Form 7385 for Release of Information.

HEPATITIS C

Hepatitis C is a virus that can damage the liver. You can get Hepatitis C from sharing needles, such as if you inject drugs, or if you get tattoos in prison. About 30% of CDCR inmates have Hepatitis C. Many people that have Hepatitis C do not feel sick or show signs of the disease. If a person does show signs, they are usually mild and can include:

- Fatigue

Patient-Inmate Orientation Handbook to Health Care Services

- Sadness
- Pain
- Nausea
- Poor appetite
- Night sweats
- Muscle soreness

Hepatitis C can damage the liver slowly. Some patients with Hepatitis C will develop cirrhosis (scarring of the liver) over a period of several decades. Hepatitis C patients who develop cirrhosis are more likely to get liver cancer. There are treatments for Hepatitis C that involve medications that must be taken for six to twelve months.

The CCHCS has a Hepatitis C Program that has set up guidelines to determine which patients should be treated for Hepatitis C. The Hepatitis C Program also monitors all patient-inmates who are treated for Hepatitis C. If you want to be tested for Hepatitis C, you must fill out Form 7362 and ask for the test. You will NOT be charged a co-payment fee for Hepatitis C testing.

SPECIALTY CONSULTATIONS

Health care staff will provide specialty services for you, based on medical necessity. Your doctor may order specialty services if you need medical care that is outside his or her expertise. These services may include:

- Medical
- Surgical
- Laboratory
- Radiological
- Dental
- Other specialized services required for your care

PHYSICAL THERAPY

If a doctor decides that you need physical therapy, he or she will write an order for you to have a meeting with a physical therapist.

DIETARY SERVICES AND COUNSELING

The CDCR gives you standard meals three times a day. Your doctor, dentist or dietitian may give you a special diet based on your medical needs.

Patient-Inmate Orientation Handbook to Health Care Services

You may receive special meals prepared under the supervision of a Registered Dietitian if:

- You are admitted to a licensed general acute care hospital (GACH).
- You are admitted to a Skilled Nursing Facility (SNF).
- You are admitted to a Correctional Treatment Center (CTC).
- You are receiving treatment in a recognized outpatient therapeutic diet program (renal, pre-renal, hepatic, and gluten-free).

Your doctor may order nourishment bags or supplements if medically necessary. You may be counseled and educated by a Registered Dietitian.

HEALTH CARE EDUCATION

Health care staff will help educate you about:

- Disease prevention
- Recommended treatment plans
- Available health care resources

This education will help you to participate in your disease management and prevention.

Health care staff will determine your specific health educational requirements and provide you with:

- Verbal counseling
- Printed educational materials.

Health education topics may include:

- Wellness/Prevention
- Newly diagnosed illness or disease
- Treatment plan (e.g., diet, medications, special appliances or equipment)
- Procedures, tests
- Before and after surgery care
- Compliance with treatment plan
- Lifestyle changes (e.g., exercise, quitting smoking, nutrition, medication compliance)

MENTAL HEALTH SERVICES

CDCR's Mental Health Service Delivery System (MHSDS) provides inmates with access to mental health services.

Placement in the MHSDS

All mental health screening and evaluation interviews are done in a private setting. You are asked questions about your mental health as part of your initial health screening at the reception center. If your answers showed you needed mental health services, you have probably already been seen by a mental health clinician (clinical social worker, psychologist, or psychiatrist).

Identification and enrollment into the MHSDS may occur at any time, including:

Patient-Inmate Orientation Handbook to Health Care Services

- At the Reception Center
- By self-referral. Complete a CDCR Form 7362 and place it in one of the Medical locked boxes in the housing areas or give to health care staff.
- By referral from another provider or CDCR staff member

Treatment criteria for inclusion in the MHSDS are based on having a serious mental condition, diagnosis of exhibitionism, or medical necessity, defined as mental health intervention that is necessary to protect life and/or treat significant disability/dysfunction in an individual diagnosed with or suspected of having a mental disorder. Treatment of these conditions is continued only upon reassessment.

Mental Health Crises

You can ask to talk to mental health staff at any time of the day or night, seven days a week. If it is an emergency, mental health staff will see you as soon as possible. Each institution provides 24-hour emergency service. Ask for emergency mental health services if you feel like hurting yourself or someone else, are experiencing thoughts of suicide, if you are feeling confused, or if you are not able to think clearly. Coverage is provided by the Psychiatrist-on-Call after hours and on weekends and holidays.

Self-Referrals

When you write a request for mental health services, be as specific as possible about your problem. Mental health staff will see you within seven days, but if your concern is urgent, they will see you sooner. If you are in a crisis, as noted above, do not wait to complete the form but notify staff immediately. It is much better to be honest about the problems you are having so that we can help you cope with the things that are difficult for you. Please do not think you have to make up symptoms to get mental health services, or that you should hide problems that you are having.

The Treatment Program

If you are enrolled in the MHSDS:

- You will be assigned a primary clinician.
- You will have routine scheduled appointments based on your level of care.
- You will NOT pay any co-pay.
- You will be required to participate in your treatment plan. Although you have the right to refuse treatment, you may still be placed in a mental health program if mental health staff determines that it is necessary.

Mental health care is provided by:

- Psychiatrists
- Psychologists
- Clinical Social Workers
- Recreational Therapists
- Registered Nurses
- Licensed Psychiatric Technicians
- Licensed Vocational Nurses

Patient-Inmate Orientation Handbook to Health Care Services

Available mental health services may include:

- Medication
- Individual therapy
- Group therapy
- Recreational therapy
- Aftercare planning.

Treatment within the mental health program in CDCR may occur at four levels:

- Correctional Clinical Case Management System (CCCMS)
 - a. Stable functioning in the general population, ASU or SHU
- Enhanced Outpatient Program (EOP)
 - a. Mental health symptoms that have developed suddenly or increased in severity.
 - b. Inability to function in the General Population due to your mental health condition
- Mental Health Crisis Bed Placement (MHCB)-Inpatient care
 - a. Difficulty completing and following through with ordinary daily activities.
Requires 24-hour nursing care
- In addition, inpatient care is available at the Department of State Hospitals and in the Psychiatric Inpatient Program at CIW. These programs are designed for inmates who require longer-term and more intensive inpatient hospitalization than the MHCB's provide.

Placement in a particular level of care is determined by your mental health needs. Your primary clinician will work with you to determine which program is best for you. Medication needs will be determined by a psychiatrist.

DENTAL SERVICES

You will get dental services that a dentist decides are clinically necessary as defined in the *California Code of Regulations (CCR)*, Title 15, Section 3350. You can find a copy of Title 15 in the law library.

Dental services may help take away dental pain. Dental services include finding and treating dental problems that may be a danger to your health or that make it hard for you to chew your food.

Available dental services include:

- Exams
- Cleanings
- Amalgam (silver colored) fillings
- Composite (tooth colored) fillings for front teeth only

Patient-Inmate Orientation Handbook to Health Care Services

- Extractions/Oral surgery (removal of teeth)
- Stainless steel crowns (caps)
- Full and partial dentures (false teeth)
- Treatment to help keep your teeth and gums healthy
- Information to help you keep your teeth and gums healthy

The CDCR does NOT provide the following dental services:

- Gold or porcelain crowns (caps) or bridges
- Implants (artificial teeth that screw into the jaw)
- Orthodontics (braces)
- Bleaching of teeth (teeth whitening)
- Cosmetic dentistry (dental care only to make you look better)
- Root canals on back teeth
- Root canal surgery
- Treatment for pain in your jaw joints
- Removal of wisdom teeth that do not need to come out
- Surgery to remove wisdom teeth that are too hard to take out even for a specialist

If you want dental care, you must ask for it. To ask for dental care, you must fill out a CDCR Form 7362 every time you want dental services.

You may have to pay a \$5 co-payment for each dental visit. There is also a separate charge to get false teeth. There is no \$5 co-payment charge for dental screenings or exams.

You will get dental services on a priority basis. The dentist will decide the priority of your dental problems by doing a dental exam or dental screening. The dental priority classifications (DPC) are:

DPC 1 – Urgent Care: You need treatment for an injury, pain, infection, swelling, or other serious dental problem.

DPC 2 – Interceptive Care: You need less urgent, but not routine dental care. For example, if you have deep cavities or many cavities or if you do not have enough teeth to chew your food.

DPC 3 – Routine Care: You need treatment for dental problems that are not serious and can wait. Your level of oral hygiene (how well you clean your teeth) and the time left on your sentence will determine if you qualify for DPC 3 services.

DPC 4 – You do not need dental care.

DPC 5 – You have special dental needs.

Emergency dental treatment is available 24 hours a day, 7 days a week. If you need emergency or urgent dental care, tell a staff member (e.g., a custody officer, work

Patient-Inmate Orientation Handbook to Health Care Services

supervisor, or nurse) about your dental emergency. DPC 1 problems are more urgent so the dentist may need to treat them before taking care of DPC 2 or 3 problems.

A dentist may do a screening at the Reception Center (RC) and tell you that you need dental treatment. At an RC, you can only get treatment for Emergency and DPC 1 dental problems. Dental staff at an RC may also teach you how to brush and floss your teeth if the dentist says you need it.

Soon after you arrive at a Mainline Facility, dental staff will notify you that you can have a dental exam. After you receive the notification, you must submit a CDCR Form 7362 if you want to see a dentist for a dental exam. The dentist will make a list of your dental problems during the exam. You may only get treatment for Emergency and DPC 1 dental problems if you have less than 12 months left on your sentence. If you have more than 12 months left on your sentence, you may get treatment for all your dental problems.

You must sign a consent form to give your permission for dental treatment. If you refuse dental treatment, you must sign a CDC Form 7225, Refusal of Examination and/or Treatment.

In order to get treatment of DPC 3 dental problems at a Mainline Facility (except for the treatment of gum disease) you must keep your teeth clean enough to have a good level of oral hygiene.

A dental staff member will check how many of your teeth have plaque on them and figure out your plaque index score. Dental plaque is a sticky material on your teeth and gums that has bacteria in it. These bacteria cause cavities. A plaque index score of 20% or lower is a good level of oral hygiene.

When your plaque index score is higher than 20%, dental staff will offer to help you improve your score. They will do this by cleaning your teeth and/or by teaching you how to brush and floss your teeth. The plaque index score helps dental staff teach you how important it is to have clean teeth and gums.

You must practice brushing and flossing for 30 days after dental staff teaches you how to brush and floss your teeth. This is to see if your plaque index score gets better. You must submit a CDCR Form 7362 at the end of the 30 day period to see if your plaque index score is good enough to qualify for DPC 3 dental services.

If your plaque index score remains higher than 20%, or if you refuse the instructions on how to brush and floss your teeth, you may receive only Emergency, DPC 1, 2 (depending on the time left on your sentence), and 5 dental care.

A GUIDE TO DENTAL ORAL HYGIENE (SELF-CARE)

Keep your teeth and gums healthy.

What can I do to keep my mouth healthy?

You can do a lot to keep your mouth healthy.

- Eat a nutritious diet.
- Limit snacks between meals.
- Brush and floss your teeth each and every day.

BRUSHING

Establish a routine for brushing your teeth.

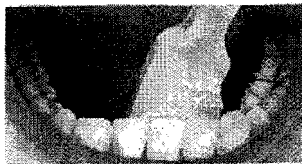
- Brush twice a day, when you wake up and before you go to sleep.
- Brush for at least three minutes at a time.
- Use a soft bristled toothbrush with fluoride toothpaste or toothpowder.
- Hold the brush at a 45-degree angle at the gum line.



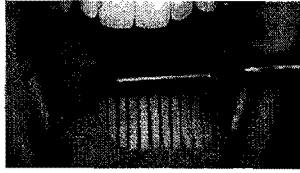
- Brush all teeth. Start at one place and work all around the mouth.
- Gently brush the front, back and chewing surfaces using small circular motions.



- Turn the brush and use the tip to brush the back surfaces of the upper and lower front teeth.



- Brush your tongue.



- Rinse with water after you brush.

FLOSSING

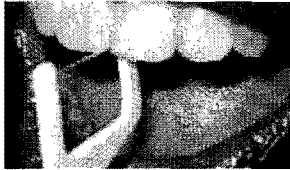
Flossing between your teeth and under the gums is every bit as important as brushing. Use floss at least once a day.

The California Department of Corrections and Rehabilitation has authorized the inmate use of a dental flossing device.



How to use the flossing device:

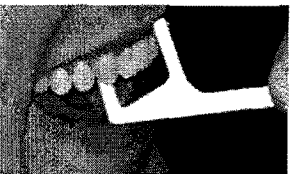
- Position the floss over the spot where two teeth meet.



- With a rocking motion, apply gentle pressure to move the floss between the teeth.

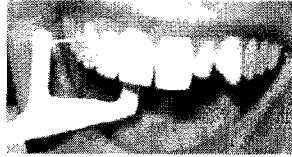


- Slide the floss first under the gum around one of the teeth in a U shape.



Patient-Inmate Orientation Handbook to Health Care Services

- Move the floss up and down the side of the tooth 3-5 times. The floss needs to get under the gum.
- Reverse the U and floss the other tooth.



- Remove the floss and place it between the next two teeth.
- Repeat the process on all remaining teeth.
- After flossing, rinse your mouth with water.

It is up to you to protect your teeth and gums. Tooth decay and gum disease can harm your mouth and affect how you feel about yourself. Brushing and flossing daily will help prevent tooth decay and gum disease. So, take control now to keep your mouth healthy!

PALLIATIVE CARE

If you have a terminal illness and there is no cure for your illness, you will be given comfort care, relief from pain, and support. If you qualify for hospice care, the doctor will refer you. Hospice care is available for both men and women. When appropriate, the Chief Medical Executive or designee may request that you receive a "Compassionate Release."

Palliative therapies help ease your symptoms with treatment such as pain management and nutritional support. If you are receiving palliative care, you will also continue to receive medically necessary treatment for other medical conditions unless you instruct otherwise.

ADVANCE DIRECTIVE FOR HEALTH CARE

You have the right to control decisions relating to your own health care. This includes the decision not to have or to stop any treatment to keep you alive. You can use CDCR Form 7421 *Advance Directive for Health Care* to state your wishes for end-of-life care. You use this form to:

- Give instructions for future healthcare decisions
- Choose a person you want to make decisions for you about your health care.

The person you choose can make decisions for you when you can't. It is your responsibility to give copies of the advance directive to the person(s) you chose. You have to sign and date the form.

You do not have to have an advance directive, but you can ask for one at any time.

PHYSICIAN ORDERS FOR LIFE SUSTAINING TREATMENT (POLST)

POLST is a legal form (Form 7465) that you should think about having if you:

- Are old
- Have serious health problems
- Have less than six months to live.

The POLST must be signed by a physician and your wishes must be followed.

- You or the person you chose can start or cancel POLST at any time
- If you are unable to sign a POLST, the doctor will honor your verbal instructions
- Even without a POLST or a Do Not Resuscitate (DNR), you will always receive the best of medical care.

HEALTH CARE RELATED APPEALS – FORM 602-HC INMATE/PAROLEE HEALTH CARE APPEAL FORM

If you have any complaints about your health care, you can file a grievance (complaint), using the standard health care related appeal form, the CDCR Form 602-HC *Inmate/Parolee Health Care Appeal Form*. You can find CDCR Form 602-HC forms in the housing units and the library. CDCR 602-HC appeals about health care should be sent to the Health Care Appeals Coordinator (HCAC).

If you have a complaint about co-payment, you must attach a copy of the Trust Accounting sheet to the appeal to show proof of the charge. A physician may be asked to respond to this issue and verify whether the visit qualifies for co-payment. If you are ducated and seen as a result of an appeal, a co-payment is still required if the co-payment meets the criteria established in the California Code of Regulations, Title 15.

Withdrawals – If you want to cancel or withdraw a complaint, you must sign and date the appeal and write that the appeal is withdrawn and also write why you want to cancel the appeal.

Your appeal will be completed in a timely fashion and staff will make every effort for a quick response.

Some of the rules regulating health care appeals are:

- You must submit your appeal within 30 calendar days of event or knowledge of event.
- You must submit appeals for First and Second Level Reviews within 30 calendar days of your receipt.
- You may submit one appeal every 14 calendar days with the exception of emergency appeals and appeals deemed exceptional.
- Emergency appeals are for when the regular appeal time limits would subject you to a large risk of injury or cause other serious and irreparable harm.
- Exceptional appeals can be any appeal if the appeals coordinator or third level appeals Chief feel that your appeal should be reviewed further. This decision is

Patient-Inmate Orientation Handbook to Health Care Services

made if there is compelling evidence or receipt of new information such as documentation from health care staff that you were medically or mentally incapacitated and unable to file.

RELEASE OF HEALTH CARE INFORMATION

If you want someone else to look at your health care information, you need to fill out CDCR Form 7385, *Authorization for Release of Information*.

The CDCR Form 7385 must:

- Be signed by you or your personal representative
- Say what information you want released OR to release all of the information.
- Say who gets the information and give their address
- Say why they need the information
- Choose a date when the information should no longer be made available

You must put in writing, if you want to update, change or remove your CDCR Form 7385 at any time.