

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES
Health Care Department Operations Manual

3.3.5.8 Continuity of Care

(a) Policy

All California Department of Corrections and Rehabilitation (CDCR), Division of Health Care Services dental staff shall ensure that patients are provided ongoing, medically necessary dental care in accordance with applicable state laws and commensurate with community standards of care.

(b) Purpose

To provide guidelines to assist in ensuring that CDCR patients receive continuity of health care.

(c) Procedure

- (1) Patients' dental health care information shall be documented in a health record or other clinically appropriate media. The health record shall be established during intake and shall be accessible when the patient transfers or moves within the system.
- (2) All health care encounters are to be documented in the health record as outlined in the Health Care Department Operations Manual (HCDOM), Section 3.3.6.1(c)(1)(F) through (H).
- (3) For Mainline Facilities, dental staff shall monitor the:
 - (A) QM Dental Transfers Report on a daily basis to identify patients who recently arrived at the institution to ensure continuity of care for these individuals.
 - (B) QM Dental Scheduling Report and/or Electronic Dental Record System (EDRS) Scheduling Assistant on a daily basis to identify patients with documented, untreated dental conditions and schedule the patients within the mandated DPC timeframes, in accordance with EDRS Workflow 2-1 and associated Front Office Job Aid.
 - (C) EDRS Treatment Request Manager on a daily basis to identify patients with DAR and/or specialty referrals to ensure patients are scheduled for treatment in a timely manner, in accordance with EDRS Workflow 2-1 and associated Front Office Job Aid.
 - (D) QM Exam Notices Report on a regular basis to identify patients who are eligible for a periodic comprehensive dental examination and need to receive an exam eligibility notification, in accordance with EDRS Workflow 1-5 and associated Front Office Job Aid.
 - (E) QM Dental Prosthetics Log Report on a regular basis to monitor and manage patients who have a dental prosthetic case in progress.
- (4) When dental staff becomes aware that a patient has transferred to a Mainline Facility without undergoing a Reception Center (RC) dental screening, dental staff at the receiving assigned institution shall:
 - (A) Schedule the patient for an RC dental screening if the patient qualifies as defined in the HCDOM, Sections 3.3.2.2(c)(1)(A) and (B).
 - (B) Follow the process outlined in the HCDOM, Sections 3.3.2.2(c)(1)(B)1. through 3. if in the professional judgment of a CDCR dentist the patient does not need to receive a new RC dental screening.
 - (C) Follow the process outlined in the HCDOM, Sections 3.3.2.2(c)(1)(C) and (D) if the patient qualifies for and needs an RC dental screening.
 - (D) Verify and ensure that the patient has been sent an examination eligibility notification.
- (5) The treating dentist shall be charged with the duty of 'case management' to monitor:
 - (A) Timely scheduling of appointments.
 - (B) Rescheduling of cancelled or failed appointments.
 - (C) Necessary medical lab work or oral pathology specimen analysis.
 - (D) Patient follow-up regarding medical and/or oral pathology lab results that are the outcome of a CDCR or contracted dentist ordering the analysis.
 - (E) Referrals to specialists.
 - (F) Follow-up care ordered by specialists.
 - (G) Intermediate appointments for prosthetic cases.
- (6) Dentist Responsibility Regarding Report/Test Results
 - (A) The treating dentist shall review all internal consultation reports, medical and oral pathology lab reports and reports from outside the facility within seven business days of receipt of the report by the dental clinic. (Reference the HCDOM, Section 3.3.6.1(c)(1)(F) through (H) for documentation requirements).

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- (B) The dentist shall inform the patient of the result(s) of the report(s) within three business days of reviewing the report(s). (Reference the HCDOM, Section 3.3.6.1(c)(1)(F) through (H) for documentation requirements). The dentist shall:
1. Send a written notification in accordance with EDRS Workflow 3-1 and associated Dentist Back Office Job Aid. The notification must:
 - a. Be generated using the EHRS Patient Notification Letter process.
 - b. Include:
 - 1) The date of the consult or test.
 - 2) The reviewing dentist's name.
 - 3) Whether the results are within normal limits.
 - 4) Whether a follow-up encounter is required and will be scheduled.
 - 5) Language advising patients to submit a CDCR 7362 if they would like to discuss the results in person when the report/test results are negative for pathology or are within normal limits. (Reference Section (c)(6)(B)2. for patients whose results are positive for pathology or are not within normal limits).
 - a) If a patient submits a CDCR 7362 indicating a desire to discuss the report/test results with the provider, the dentist performing the paper review shall assign the CDCR 7362 a Paper Review Code of "Other" (or "Routine").
 - b) The dentist performing the paper review shall have the patient scheduled within the appropriate timeframe. (Reference the HCDOM, Section 3.3.5.13(d)(2)(B)7.b.).
 - c. Be sent within the mandated timeframe.
 - d. Be delivered to the patient through the Institution Interdepartmental Mail or the process used for priority ducat distribution.
 - e. Not contain the name or type of consult or test the patient underwent.
 2. Have the OT, or designated dental staff, schedule patients for an encounter within the mandated timeframe to explain the results when the report/test results are positive for pathology or are not within normal limits.
 3. Document in an EDRS clinical note:
 - a. The consult or test result(s) reviewed.
 - b. Any action required or taken based on the result(s) (e.g., patient referred to primary care provider due to elevated International Normalized Ratio [INR]).
 - c. That the patient was notified of the result(s) via the EHRS Patient Notification Letter process.
 - d. The disposition of follow up care, whether a face-to-face encounter was scheduled or the patient advised to submit a CDCR 7362 to access care.
- (7) The OT, or designated dental staff, under the direction of the treating dentist, shall track all referrals and medical, dental or pathology laboratory procedures to ensure their completion.
- (8) If a patient is transferred to another institution, a dentist shall review the dental treatment plan prior to providing treatment. A review is not required if the patient is being seen by the new institution's dental staff for only one appointment, or is being treated on a specific referral basis.
- (9) Health care staff shall prepare a care plan, including provisions for referrals, special diets, medications and other appropriate regimens for patients who have special dental needs and are being released from the CDCR.

References

- Health Care Department Operations Manual, Chapter 3, Article 3, Section 3.3.5.13, Access to Care
- Health Care Department Operations Manual, Chapter 3, Article 3, Section 3.3.6.1, Health Records Organization and Maintenance

Revision History

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