

August 28, 2026

NOTICE OF CHANGE TO TEXT AS ORIGINALLY PROPOSED

The California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS) is providing notice of proposed changes to the Department's regulations concerning Health Care Allegations of Staff Misconduct, which were published in the California Regulatory Notice Register on October 24, 2025. The Department is providing notice of these proposed changes and an opportunity for public comment in accordance with Government Code section 11346.8(c) and California Code of Regulations (CCR), Title 1, section 44. You are receiving this notice because you provided written comments (including comments submitted via e-mail) or expressed an interest in receiving notice of changes regarding this rulemaking action.

Enclosed with this Notice of Change to Text as Originally Proposed, please find the revised regulatory text. Additionally, the Department is proposing to repeal the CDCR 602 HC (Rev. 7/18), Health Care Grievance, and adopt the CDCR 602 HC (Rev. 10/18), Health Care Grievance, to reflect non-substantive formatting changes.

To provide notice of the proposed changes to the public, this Notice is posted on the CCHCS Internet website at: <https://cchcs.ca.gov/health-care-regs/>.

The comment period for these changes will close on September 14, 2026. Please submit comments by e-mail to HCreulationsandpolicy@cdcr.ca.gov or in writing to the Department's contact person at the address below before the close of the public comment period. Comments must be received no later than 5:00 p.m. on September 14, 2026. Only those comments relating directly to the amendments that are indicated by double underline or ~~double strikethrough~~ will be considered.

Inquiries regarding this notice should be directed to A. Burrell, Health Care Regulations and Policy Section, CCHCS, P.O. Box 588500, Elk Grove, CA 95758, by telephone at (916) 691-2921, or e-mail at HCreulationsandpolicy@cdcr.ca.gov. In the event the contact person is unavailable, inquiries should be directed to R. Hart, at (916) 691-2922.

REVISIONS TO THE TEXT AS ORIGINALLY PROPOSED

In the following regulations text, double underline indicates text added and ~~double strikethrough~~ indicates text deleted since the original Notice of Change to Health Care Regulations.

The single underline and ~~single strike through~~ formatting from the original proposed text noticed to the public has been retained.

California Code of Regulations, Title 15, Division 3, Adult Institutions, Programs, and Parole Chapter 2. Rules and Regulations of Health Care Services

Subchapter 2. Patient's Entitlements and Responsibilities

Article 2. Health Care Forms

Section 3999.99 is amended to incorporate in alpha-numerical order the following, and all other text within this section remains the same:

Section 3999.99. Forms.

CDCR 602 HC (Rev. ~~7~~10/18), Health Care Grievance

Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code.

Article 5. Health Care Grievances

Section 3999.225 Definitions is amended:

3999.225 Definitions

Sections (a) through (v) remain unchanged.

(w) Reviewing authority means health care staff authorized to approve and sign health care grievance responses to ensure procedural due process. The reviewing authority does not conduct a clinical review, and shall not be an individual who participated in the event or decision being grieved.

~~(1) The reviewing authority shall not be an individual who participated in the event or decision being grieved.~~

~~(2) Health care grievances and staff complaints submitted at the institutional level are approved and signed by the Chief Executive Officer (health care) or designee. Circumstances may warrant the headquarters' level reviewing authority to assign a designee.~~

~~(3) Health care grievances and staff complaints submitted at contracted, community correctional, or out of state facilities are approved and signed by an executive level designee. Circumstances may warrant the headquarters' level reviewing authority to assign a designee.~~

~~(4) Health care grievance appeals and staff complaints submitted at the headquarters' level are approved and signed by the Deputy Director, Policy and Risk Management Services, or designee.~~

~~(x) Staff misconduct means health care staff behavior or activity that violates a law, regulation, policy, or procedure, or is contrary to an ethical or professional standard.~~

(~~yx~~) Supporting documents means any document the patient may need to substantiate allegations made including, but not limited to, property inventory sheets, property receipts, trust account statements, and written requests for interviews, items, or health care services. Supporting documents do not include documents that only restate the issue(s) ~~grieved~~, argue its merits, or introduce new issues not identified in the current health care grievance form(s), or documents accessible to health care staff, such as patient health records.

(1) If submitting a health care grievance related to a reasonable accommodation decision, supporting documents include the reasonable accommodation request package and response.

(2) If submitting a health care grievance appeal, supporting documents include the original institutional level health care grievance response.

Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code; *Coleman v. Newsom* (No. S90-0520 LKK JFM P) U.S. District Court, Eastern District of California; *Armstrong v. Newsom* (N.D.Cal. 2020) 484 F.Supp.3d 808; ~~*Armstrong v. Newsom* (No. C 94-2307 CW), U.S. District Court, Northern District of California;~~ and *Plata v. Newsom* (No. C01-1351 JST), U.S. District Court, Northern District of California.

Section 3999.228 Institutional Level Health Care Grievance Review is amended:

Section 3999.228 Institutional Level Health Care Grievance Review.

Sections (a) through (f)(3) remain unchanged.

~~(4) The health care grievance is deemed a health care staff complaint and in such case, health care staff shall conduct the interview pursuant to section 3999.231.~~

Sections (g) through (i) remain unchanged.

(j) Health care grievance responses shall be approved and signed pursuant to section 3999.225(~~xw~~).

Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code; Americans With Disabilities Act, Public Law 101-336, July 26, 1990, 104 Stat. 328; Civil Rights of Institutionalized Persons Act, Title 42 U.S.C. Section 1997 et seq., Public Law 96-247, 94 Stat. 349; Section 35.107, Title 28, Code of Federal Regulations; *Armstrong v. Newsom* (N.D.Cal. 2020) 484 F.Supp.3d 808; ~~*Armstrong v. Newsom* (No. C 94-2307 CW), U.S. District Court, Northern District of California;~~ *Coleman v. Newsom* (No. S90-0520 LKK JFM P) U.S. District Court, Eastern District of California; and *Plata v. Newsom* (No. C01-1351 JST), U.S. District Court, Northern District of California.

Section 3999.230. Headquarters' Level Health Care Grievance Appeal Review is amended:

Section 3999.230 Institutional Headquarters' Level Health Care Grievance Appeal Review.

Sections (a) through (f) remain unchanged.

(g) Headquarters' level health care grievance appeal responses shall be approved and signed pursuant to section 3999.225(~~xw~~).

Sections (h) through (l) remain unchanged.

Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code; Americans With Disabilities Act, Public Law 101-336, July 26, 1990, 104 Stat. 328; Civil Rights of Institutionalized Persons Act, Title 42 U.S.C. Section 1997 et seq., Public Law 96-247, 94 Stat. 349; Section 35.107, Title 28, Code of Federal Regulations; Section 1013(a), California Code of Civil Procedure; Armstrong v. Newsom (N.D.Cal. 2020) 484 F.Supp.3d 808, ~~Armstrong v. Newsom~~ (No. C-94-2307-CW), U.S. District Court, Northern District of California; *Coleman v. Newsom* (No. S90-0520 LKK JFM P) U.S. District Court, Eastern District of California; and *Plata v. Newsom* (No. C01-1351 JST), U.S. District Court, Northern District of California.

Section 3999.231 Health Care Staff Complaints is repealed:

~~3999.231 Health Care Staff complaints~~

~~(a) Health care grievances determined to be health care staff complaints after receiving a clinical triage shall be processed pursuant to Subchapter 2, Article 5.1 and not as a citizen's complaint.~~

~~(b) The HCGO shall present health care grievances alleging health care staff misconduct to the reviewing authority within five business days of receipt. The reviewing authority shall review the complaint and determine if:~~

~~(1) The allegation will be addressed as a health care grievance or as a health care staff complaint.~~

~~(2) The allegation will be processed as a health care staff complaint but does not warrant referral for an allegation inquiry or investigation, or the request for an investigation has been declined, in which case a confidential inquiry report shall be completed pursuant to section 3999.231(f).~~

~~(3) The allegation will be processed as a health care staff complaint and warrants referral to the applicable authority for an allegation inquiry or investigation.~~

~~(c) A health care staff complaint alleging excessive or inappropriate use of force shall be addressed pursuant to the procedures described in sections 3268 through 3268.2.~~

~~(d) A health care staff complaint alleging staff sexual misconduct shall be processed pursuant to the procedures described in section 3084.9.~~

~~(e) If the health care staff complaint alleges health care or other issues unrelated to the allegation of health care staff misconduct, the HCGO shall notify the grievant that those unrelated issues shall be grieved separately and within 30 calendar days plus five calendar days for mailing from the date noted on the written notification.~~

~~(f) Confidential Inquiry Report. Health care staff with supervisory authority over the subject of the health care staff complaint shall:~~

~~(1) Conduct an inquiry to determine if health care staff behavior or activity violated a law, regulation, policy, or procedure, or was contrary to an ethical or professional standard, even if the grievant has paroled, discharged, or is deceased.~~

~~(2) Interview the following to reach a determination concerning the allegation(s):~~

~~(A) The patient.~~

~~(B) All necessary witnesses.~~

~~(C) The subject of the health care staff complaint, unless no longer employed by CDCR or on a leave of absence.~~

~~1. The subject of the health care staff complaint will be given notice of the interview at least 24 hours prior to the interview. If the subject chooses to waive the 24-hour requirement, he or she must indicate this at the time they are given notice. If waived, the subject may be interviewed immediately.~~

~~(3) Prepare a confidential inquiry report and include evidence to support a determination of the findings concerning the allegation(s).~~

~~(4) The HCGO shall maintain the original and any redacted versions of the confidential inquiry report.~~

~~(A) The confidential inquiry report shall not be released to incarcerated persons under any circumstances.~~

~~(B) The subject of the health care staff complaint is entitled to know whether or not he or she violated policy and may view the confidential inquiry report in the HCGO under the following conditions:~~

~~1. With approval from the institutional litigation coordinator.~~

~~2. With redaction of other staffs' information including, but not limited to, identity, interview content, potential discipline, or inquiry findings.~~

~~(C) Requests for release of a confidential inquiry report relating to litigation shall be forwarded to the headquarters' health care Litigation Coordinator for review and approval to release.~~

~~(g) The institutional level response to a health care staff complaint shall inform the patient of either:~~

~~(1) The decision to conduct a confidential inquiry and the outcome.~~

~~(2) The decision to refer the matter to the applicable investigating authority.~~

~~(h) Time limits for processing health care staff complaints shall be completed and returned to the patient pursuant to sections 3999.228(i) or 3999.230(f).~~

~~(i) Institutional level health care staff complaint responses shall be approved and signed pursuant to section 3999.225(x).~~

~~(j) The headquarters' level is for administrative review of the institutional level response of a health care staff complaint for which the patient is dissatisfied with the institutional level disposition or if the patient alleges headquarters' health care staff misconduct.~~

~~(k) Headquarters' level health care staff complaint responses shall be approved and signed pursuant to section 3999.225(x).~~

~~Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code; Americans With Disabilities Act, Public Law 101-336, July 26, 1990, 104 Stat. 328; Civil Rights of Institutionalized Persons Act, Title 42 U.S.C. Section 1997 et seq., Public Law 96-247, 94 Stat. 349; Section 35.107, Title 28, Code of Federal Regulations; Section 1013(a), California Code of Civil Procedure; *Armstrong v. Newsom* (No. C 94-2307-CW), U.S. District Court, Northern~~

~~District of California; *Coleman v. Newsom* (No. S90-0520 LKK JFM P) U.S. District Court, Eastern District of California; and *Plata v. Newsom* (No. C01-1351 JST), U.S. District Court, Northern District of California.~~

Section 3999.235 Health Care Grievance and Health Care Grievance Appeal Withdrawal is amended:

3999.235 Health Care Grievance and Health Care Grievance Appeal Withdrawal

~~(a) With the exception of health care grievances determined to be health care staff complaints, t~~The patient may withdraw a health care grievance or health care grievance appeal by requesting to have the processing stopped stop the process at any point up to receiving a signed response.

Sections (b) through (e)(2) remain unchanged.

Note: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code; Americans With Disabilities Act, Public Law 101-336, July 26, 1990, 104 Stat. 328; Civil Rights of Institutionalized Persons Act, Title 42 U.S.C. Section 1997 et seq., Public Law 96-247, 94 Stat. 349; Section 35.107, Title 28, Code of Federal Regulations; *Armstrong v. Newsom* (N.D.Cal. 2020) 484 F.Supp.3d 808~~*Armstrong v. Newsom* (No. C-94-2307-CW), U.S. District Court, Northern District of California; *Coleman v. Newsom* (No. S90-0520 LKK JFM P) U.S. District Court, Eastern District of California; and *Plata v. Newsom* (No. C01-1351 JST), U.S. District Court, Northern District of California.~~

Article 5.1 Allegations of Misconduct Against Health Care Staff is adopted:

Article 5.1 Allegations of Misconduct Against Health Care Staff

3999.239 Allegations of Misconduct Against Health Care Staff

(a) Definitions. For the purpose of Subchapter 2, Article 5.1, the following definitions apply:

(1) Centralized Screening Team (CST) means the team within the Office of Internal Affairs responsible for screening all grievances for allegations of staff misconduct including to include reasonable accommodations, Prison Rape Elimination Act (PREA), and use of force (UOF) and routing the allegations to the appropriate program for processing pursuant to section 3486.1.

(2) Health Care Allegation Examiner (HCAE) means departmental staff at the level of a Staff Services Manager (SSM) Supervisor I or higher, trained in techniques to conduct inquiries and research into allegations of staff misconduct.

(3) Health Care Correspondence and Appeals Branch (HCCAB) means the office responsible for statewide oversight of the grievance program and the headquarters' level health care grievance appeal review.

(4) Health Care Grievance Office (HCGO) means the office responsible for coordinating the institutional level health care grievance review.

(5) Hiring Authority (HA) means the appointing power who may act, or delegate the power to act, and has authority to hire, initiate the investigation process by submitting a confidential request for internal affairs investigation or approval for direct adverse action, discipline, and dismiss staff. The power to act as a hiring authority may be delegated to the following classifications: Undersecretary; Assistant Secretary; General Counsel; Chief Deputy General Counsel; Executive Officer; Chief Information Officer; Director; Deputy Director; Associate Director; Assistant

Deputy Director; Chief, Office of Correctional Safety; Chief, Office of Labor Relations; Warden; Superintendent; Health Care Chief Executive Officer; Regional Health Care Administrator; Regional Parole Administrator; Parole Administrator; Superintendent of Education; Assistant Superintendent of Education; Administrator at the Richard A. McGee Correctional Training Center for Correctional Officer Cadets; or any other person authorized by the appointing power.

~~(6) Office of Internal Affairs (OIA) means the entity with authority to investigate certain serious or complex issues requiring specialized investigative skills or resources into allegations of staff misconduct.~~

(67) Staff misconduct means health care staff behavior or activity that violates a law, regulation, policy or procedure, or is contrary to an ethical or professional standard.

(b) Right to Report.

(1) Any person may report an allegation of staff misconduct (ASM) against health care staff when they believe it has occurred and shall be referred to as the Reporting Party (RP).

(2) Departmental staff shall not retaliate against any RP person for submitting an ASM.

(3) The Department shall ensure all ASM are documented, examined, and addressed with discipline including referrals for criminal prosecution, when warranted, as provided in this Article, and Chapter 1, Subchapter 5, Article 2.

(c) Submission.

(1) An ASM against health care staff may be submitted by any:

(A) An incarcerated person using a CDCR 602 HC (Rev. 10/18), Health Care Grievance, as incorporated by reference in section 3999.99, pursuant to section 3999.226.

(B) A Supervised person, member of the public, or departmental staff via using written correspondence by:

I. Email to: m_CCHCSPHCI@cdcr.ca.gov; or

II. Mail to: Health Care Correspondence and Appeals Branch, Policy and Risk Management Services, P.O. Box 588500, Elk Grove, CA 95758.

(2) The RP ASM shall document clearly all information known and available to them regarding the ASM including identification of any involved health care staff involved such as last name, first initial, title or position; a description of their involvement; and date(s).

(3) If the RP does not know the identity of involved health care staff is unknown, the ASM RP shall include provide all other available information that may assist in identification processing the ASM, including but not limited to, physical description, location, and time of alleged incident.

(4) Verbal ASM.

(A4) RPs may not submit ASM verbally w With the exception of PREA and UOF which are processed pursuant to section 3486.1, ASM shall not be reported verbally and. If ASM is reported verbally from RPs that are:

~~1. Members of the public or supervised persons, departmental staff shall:~~

~~(A) Instruct direct individuals the RP to submit the ASM in writing pursuant to (c)(1)(A) and (c)(1)(B), via:~~

~~a. Email to: m_CCHCSPHCI@edc.ca.gov; or~~

~~b. Mail to: Health Care Correspondence and Appeals Branch, Policy and Risk Management Services, P.O. Box 588500, Elk Grove, CA 95758.~~

~~2. Incarcerated persons, departmental staff shall instruct the incarcerated person to submit the ASM in writing using a CDCR 602 HC. (B) Staff shall ensure effective communication is achieved when providing instruction to the incarcerated persons pursuant to section 3999.201.~~

~~3. (C) Provide assistance to individuals who self-report reasonable accommodations or disabilities; departmental staff shall direct the RP to submit the ASM in writing as outlined in (c)(4)(A) and shall provide assistance to the RP as needed. Individuals in need of assistance shall self-report verbally or via their mode of effective communication to department staff.~~

(d) Receipt and Routing of ASM.

(1) Upon completion of clinical triage by a registered nurse for urgent or emergent health care issues requiring immediate intervention:

(A) The HCGO shall forward all CDCR 602 HCs to the CST within three business days of receipt.

(B) The HCCAB shall forward patient health care inquiries (PHCI) written correspondence with potential ASM to the CST within three business days of receipt.

(2) The CST shall screen CDCR 602 HCs and PHCI written correspondence pursuant to Chapter 1, Subchapter 5.1, Article 1.5, determine if ASM is present and route for routing appropriate ASM to the Health Care Allegations of Staff Misconduct Unit (ASMU) within the Division of Health Care Services, pursuant to Chapter 1, section 3486.1(e)(3).

(3) The ASMU shall send a written acknowledgement to the RP in response to ASM within five business days of the date received from the CST. The acknowledgement shall inform the RP state that their the ASM shall receive a health care allegation examination is being processed.

(e) Health Care Allegation Examinations.

(1) The ASM shall be assigned to a HCAE who is responsible for:

(A) Conducting a complete and unbiased examination into each ASM. If during the examination the HCAE discovers evidence of misconduct involving serious or complex issues requiring specialized investigative skills or resources, the HCAE shall suspend the examination, document the evidence in a Confidential Allegation Report (CAR), and refer back to the CST for consideration to elevate to the Allegations Investigation Unit within OIA for processing pursuant to Chapter 1, section 3486.1 Subchapter 5.1, Article 1.5.

(B) Preparing a thorough and complete CAR including to include previous ASM against the health care staff, if applicable, and recommend a finding for each ASM.

(C) Forwarding the CAR, upon approval by ASMU management, to the HA for a determination on each finding of ASM.

(2) When there are multiple ASM against the same health care staff from different ~~RPs~~ individuals, the ASM shall be combined and processed as a single examination.

(3) ASM received against contract or registry health care personnel shall be forwarded to the HA for processing.

(f) ~~HA Determination and Closure~~

(1) Within five business days of receipt of a CAR from the ASMU, ~~the~~ HA shall:

(A) Determine a finding for each ASM pursuant to ~~S~~section 3392.1; and;

(B) Forward the completed CAR to ~~Notify~~ the ASMU ~~for closure of the determination within 5 business days.~~

~~(2)~~ ~~C~~ Based upon CAR determination, the HA shall ~~P~~roceed with appropriate action pursuant to ~~S~~sections 3392 through 3392.7.

(g) ~~Closure~~

~~(12)~~ Upon receipt of the CAR signed by ~~Once notified of the HA determination,~~ the ASMU shall close the ASM.

~~(23)~~ ~~The ASMU shall process and close~~ ASM shall be closed within 90 business days from the date received from the CST.

~~(h)~~ Confidentiality.

(1) The CAR is a confidential document and shall only be seen by those involved in the ASM process as outlined in this Article.

(2) The CAR shall not be released without subpoena or court order, or without approval from the Department's Office of Legal Affairs.

NOTE: Authority cited: Section 5058, Penal Code. Reference: Section 5054, 5058.4, Penal Code; *Armstrong v. Newsom* (N.D.Cal. 2020) 484 F.Supp.3d 808; ~~*Armstrong et al. v. Newsom et al.*, United States District Court for the Northern District of California, Court Case number 94-cv-02307-CW; *Madrid v. Woodford*, Special Masters Final Report Re: Department of Corrections Post Powers Investigations and Employee Discipline; Case No. C90-3094-T.E.H; *Madrid v. Woodford*, Order; and Case No. C90-3094-T.E.H. Class Action.~~

STAFF USE ONLY	Expedited? ☐ Yes ☐ No	Tracking #:
Staff Name and Title (Print)		Date

If you think you have a medical, mental health or dental emergency, notify staff immediately. If additional space is needed, use Section A of the CDCR 602 HC A Health Care Grievance Attachment. Only one CDCR 602 HC A will be accepted. You must submit this health care grievance to the Health Care Grievance Office for processing. Refer to California Code of Regulations (CCR), Title 15, Chapter 2, Article 5 for further guidance with the health care grievance process.

Do not exceed more than one row of text per line. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First, MI):	CDCR #:	Unit/Cell #:
-------------------------	---------	--------------

SECTION A: Explain the applied health care policy, decision, action, condition, or omission that has had a material adverse effect upon your health or welfare for which you seek administrative remedy.

REPEAL

Supporting Documents Attached. Refer to CCR 3999.227 ☐ Yes ☐ No

Grievant Signature:	Date Submitted:
---------------------	-----------------

BY PLACING MY INITIALS IN THIS BOX, I REQUEST TO RECEIVE AN INTERVIEW AT THE INSTITUTIONAL LEVEL.

SECTION B: HEALTH CARE GRIEVANCE REVIEW INSTITUTIONAL LEVEL: Staff Use Only	Is a CDCR 602 HC A attached? ☐ Yes ☐ No
This grievance has been:	
☐ Rejected (See attached letter for instruction): Date: _____ Date: _____	
☐ Withdrawn (see section E)	
☐ Accepted Assigned To: _____ Title: _____ Date Assigned: _____ Date Due: _____	
Interview Conducted? ☐ Yes ☐ No Date of Interview: _____ Interview Location: _____	
Interviewer Name and Title (print): _____ Signature: _____ Date: _____	
Reviewing Authority Name and Title (print): _____ Signature: _____ Date: _____	
Disposition: See attached letter ☐ Intervention ☐ No Intervention	
HCGO Use Only: Date closed and mailed/delivered to grievant: _____	

- | | | |
|---|--|---|
| 1. Disability Code:
☐ TABE score < 4.0
☐ DPH ☐ DPV ☐ LD
☐ DPS ☐ DNH
☐ DDP
☐ Not Applicable | 2. Accommodation:
☐ Additional time
☐ Equipment ☐ SLI
☐ Louder ☐ Slower
☐ Basic ☐ Transcribe
☐ Other* | 3. Effective Communication:
☐ Patient asked questions
☐ Patient summed information
Please check one:
☐ Not reached* ☐ Reached
*See chrono/notes |
|---|--|---|

4. Comments: _____

STAFF USE ONLY

Tracking #:

SECTION C:

Health Care Grievance Appeal. If you are dissatisfied with the Institutional Level Grievance Response, explain the reason below (if more space is needed, use Section C of the CDCR 602 HC A), and submit the entire health care grievance package by mail for Headquarters' (HQ) Level health care grievance appeal review. Mail to: Health Care Correspondence and Appeals Branch, P.O. Box 588500, Elk Grove, CA 95758.

REPEAL

Grievant Signature:

Date Submitted:

SECTION D: HEALTH CARE GRIEVANCE APPEAL REVIEW HQ LEVEL: Staff Use Only

Is a CDCR 602 HC A attached? ☐ Yes ☐ No

This grievance has been:

☐ Rejected (See attached letter for instruction): Date: _____ Date: _____

☐ Withdrawn (see section E) Amendment Date: _____

☐ Accepted

Interview Conducted? ☐ Yes ☐ No Date of Interview: _____ Interview Location: _____

Interviewer Name and Title (print): _____ Signature: _____ Date: _____

Disposition: See attached letter ☐ Intervention ☐ No Intervention

This decision exhausts your administrative remedies.

HQ Use Only: Date closed and mailed/delivered to grievant:

SECTION E:

Grievant requests to WITHDRAW health care grievance: I request that this health care grievance be withdrawn from further review. Reason:

Grievant Signature:

Date Submitted:

Staff Name and Title (Print):

Signature:

Date:

STAFF USE ONLY

Distribution: **Original** - Returned to grievant after completed; **Scanned Copy** - Health Care Appeals and Risk Tracking System 2.0 (Do not place in central file or health record)

Unauthorized collection, creation, use, disclosure, modification or destruction of personally identifiable information and/or protected health information may subject individuals to civil liability under applicable federal and state laws.

STAFF USE ONLY	Expedited? ☐ Yes ☐ No	Tracking #:
Staff Name and Title (Print) _____ Signature _____ Date _____		

If you think you have a medical, mental health or dental emergency, notify staff immediately. If additional space is needed, use Section A of the CDCR 602 HC A Health Care Grievance Attachment. Only one CDCR 602 HC A will be accepted. You must submit this health care grievance to the Health Care Grievance Office for processing. Refer to California Code of Regulations (CCR), Title 15, Chapter 2, Subchapter 2, Article 5 for further guidance with the health care grievance process.

Do not exceed more than one row of text per line. WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First, MI):	CDCR #:	Unit/Cell #:
-------------------------	---------	--------------

SECTION A:

Explain the applied health care policy, decision, action, condition, or omission that has had a material adverse effect upon your health or welfare for which you seek administrative remedy:

ADOPT

Supporting Documents Attached. Refer to CCR 3999.227 ☐ Yes ☐ No

Grievant Signature:

Date Submitted:

BY PLACING MY INITIALS IN THIS BOX, I REQUEST TO RECEIVE AN INTERVIEW AT THE INSTITUTIONAL LEVEL.

SECTION B: HEALTH CARE GRIEVANCE REVIEW INSTITUTIONAL LEVEL: Staff Use Only

Is a CDCR 602 HC A attached? ☐ Yes ☐ No

This grievance has been:

☐ Rejected (See attached letter for instruction): Date: _____ Date: _____

☐ Withdrawn (see section E)

☐ Accepted Assigned To: _____ Title: _____ Date Assigned: _____ Date Due: _____

Interview Conducted? ☐ Yes ☐ No Date of Interview: _____ Interview Location: _____

Interviewer Name and Title (print): _____ Signature: _____ Date: _____

Reviewing Authority Name and Title (print): _____ Signature: _____ Date: _____

Disposition: See attached letter ☐ Intervention ☐ No Intervention

HCGO Use Only: Date closed and mailed/delivered to grievant:

- | | | |
|--|---|--|
| 1. Disability Code:
☐ TABE score ≤ 4.0
☐ DPH ☐ DPV ☐ LD
☐ DPS ☐ DNH
☐ DDP
☐ Not Applicable | 2. Accommodation:
☐ Additional time
☐ Equipment ☐ SLI
☐ Louder ☐ Slower
☐ Basic ☐ Transcribe
☐ Other* | 3. Effective Communication:
☐ Patient asked questions
☐ Patient summed information
Please check one:
☐ Not reached* ☐ Reached
*See chrono/notes |
|--|---|--|

4. Comments: _____

STAFF USE ONLY

Tracking #:

SECTION C:

Health Care Grievance Appeal. If you are dissatisfied with the Institutional Level Grievance Response, explain the reason below (if more space is needed, use Section C of the CDCR 602 HC A), and submit the entire health care grievance package by mail for Headquarters' (HQ) Level health care grievance appeal review. Mail to: Health Care Correspondence and Appeals Branch, P.O. Box 588500, Elk Grove, CA 95758.

ADOPT

Grievant Signature:

Date Submitted:

SECTION D: HEALTH CARE GRIEVANCE APPEAL REVIEW HQ LEVEL: Staff Use Only

Is a CDCR 602 HC A attached? ☐ Yes ☐ No

This grievance has been:

☐ Rejected (See attached letter for instruction): Date: _____ Date: _____

☐ Withdrawn (see section E) ☐ Accepted

☐ Amendment Date: _____

Interview Conducted? ☐ Yes ☐ No Date of Interview: _____ Interview Location: _____

Interviewer Name and Title (print): _____ Signature: _____ Date: _____

Disposition: See attached letter ☐ Intervention ☐ No Intervention

This decision exhausts your administrative remedies.

HQ Use Only: Date closed and mailed/delivered to grievant:

SECTION E:

Grievant requests to WITHDRAW health care grievance: I request that this health care grievance be withdrawn from further review. Reason:

Grievant Signature:

Date Submitted:

Staff Name and Title (Print):

Signature:

Date:

STAFF USE ONLY

Distribution: **Original** - Returned to grievant after completed; **Scanned Copy** - Health Care Appeals and Risk Tracking System 2.0 (Do not place in central file or health record)

Unauthorized collection, creation, use, disclosure, modification or destruction of personally identifiable information and/or protected health information may subject individuals to civil liability under applicable federal and state laws.