

APPENDIX 1

**FEDERAL RECEIVER'S TURNAROUND PLAN OF ACTION MATRIX
CPHCS PROJECT DEPLOYMENT BY INSTITUTION as of November 15, 2009**

TPA Goals & Objectives	Description	ASP	CAL	CCC	CCI	CCWF	CEN	CIM	CIW	CMC	CMF	COR	CRC	CTF	CVSP	DVI	FSP	HDSP	ISP	KVSP	LAC	MCSP	NKSP	PBSP	PVSP	RJD	SAC	SATF	SCC	SOL	SQ	SVSP	VSPW	WSP			
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 1.1.4</i>	Establish identification and timely treatment of contagious diseases by providing initial triage to CDCR inmates on day of arrival.	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011	Jan 2011		
Objective 1.2 Establish Staffing and Processes for Ensuring Health Care Access at Each Institution																																					
Establish Custody Units <i>Action 1.2.1</i>	Develop health care access processes and implement Health Care Access Units at all CDCR institutions.	July 2008	Jan 2009	Jun 2009	Dec 2008	Jan 2009	Jan 2009	June 2009	Jan 2009	Aug 2008	July 2008	Dec 2008	Jan 2009	Dec 2008	Jan 2009	Jan 2009	Jan 2009	Jan 2010	July 2008	Feb 2009	Feb 2009	Jan 2009	Feb 2009	Jan 2010	Nov 2008	Jan 2010	Dec 2008	Aug 2008	May 2009	Jan 2010	Dec 2009	Dec 2008	Jan 2009	Feb 2009			
Custody Operational Assessments <i>Action 1.2.2</i>	Institutional Operational Assessment reviews.	Sept 2010	Oct 2010	April 2010	Jan 2010	Aug 2010	Feb 2010	July 2010	April 2010	Mar 2010	May 2010	Feb 2010	April 2010	Mar 2010	July 2010	June 2010	April 2010	April 2010	July 2010	Oct 2010	May 2010	June 2010	May 2010	Sept 2010	Aug 2010	July 2010	June 2010	Aug 2010	June 2010	May 2010	Aug 2010	Oct 2010	Sept 2010	May 2010			
Transition custody to CDCR <i>Action 1.2.2</i>	Health Care Access Units (HCAU) transfer back to CDCR.	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011	July 2011			
Objective 1.4. Establish A Standardized Utilization Management System																																					
Access to Care - Utilization Management <i>Action 1.4.2</i>	Provide evidence based decision tools and interdisciplinary review processes to increase access to specialty care, infirmary beds and hospitalization.																																				
Goal 2 - Continuum of Health Care Services																																					
Objective 2.1. Redesign and Standardize Access and Medical Processes for Primary Care																																					
Access to Care - Episodic Care <i>Action 2.1.2</i>	Implement an Episodic Care model that will set new policy standards, streamline the process by which patient request care, improve appointment scheduling and implement Local Operating Procedures at all institutions.	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010	July 2010		
Objective 2.2. Improve Chronic Care System to Support Proactive, Planned Care																																					
Access to Care - Primary Care <i>Action 2.2.1 (2.1.1)</i>	Implement a Primary Care model that will set new policy standards, streamline clinic communication and implement Local Operating Procedures at all institutions.																																				
Access to Care (Chronic Care) <i>Action 2.2.1</i>	Assess failures in chronic care and implement a program of remediation to address conditions such as cardiovascular disease, diabetes, immune system impairment (including HIV), liver disease and asthma.	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010	Dec 2010		
Asthma (aligned with action 2.2.1)	Asthma patients were selected to implement the six elements of the Chronic Care Model.																																				
Objective 2.3. Improve Emergency Response to Reduce Avoidable Morbidity and Mortality																																					
Emergency Response Initiative <i>Action 2.3.1, 2.3.2 and 2.3.3</i>	Standardize structure and organization of CDCR Emergency Medical Response System.	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009	June 2009		
Goal 3 - Medical Care Workforce																																					
Objective 3.1. Recruit Physicians and Nurses to Fill Ninety Percent of Established Positions																																					
Nursing Positions <i>Action 3.1.1</i>	Fill 90% of nursing positions	90-100% filled	90-100% filled	90-100% filled	70-89% filled	90-100% filled	90-100% filled	90-100% filled	90-100% filled	70-89% filled	82% filled	88% filled	90.1% filled	89% filled	70-89% filled	88% filled	92% filled	90-100% filled	90% filled	86% filled	90-100% filled	90-100% filled	70-89% filled	86% filled	70-89% filled	89% filled	100% filled	87% filled	70-89% filled	96% filled	70-89% filled	90-100% filled	70-89% filled	78% filled			
Physician Positions <i>Action 3.1.2</i>	Fill 90% of physicians positions	69% or less filled	90-100% filled	70-89% filled	69% or less filled	90-100% filled	70-89% filled	90-100% filled	90-100% filled	90-100% filled	96% filled	90-100% filled	92% filled	69% or less filled	100% filled	100% filled	71% filled	100% filled	70-89% filled	89% filled	100% filled	76% filled	69% or less filled	69% or less filled	90-100% filled	90-100% filled	69% or less filled	100% filled	100% filled	70-89% filled	50% filled	90-100% filled	90-100% filled	78% filled			

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TPA Goals & Objectives	Description	ASP	CAL	CCC	CCI	CCWF	CEN	CIM	CIW	CMC	CMF	COR	CRC	CTF	CVSP	DVI	FSP	HDSP	ISP	KVSP	LAC	MCSP	NKSP	PBSP	PVSP	RJD	SAC	SATF	SCC	SOL	SQ	SVSP	VSPW	WSP		
Mental Health Tracking System (MHTS) Action 5.4.1	Upgrade current Mental Health Tracking System replacing 32 separate Access databases. (Pilot started, completion date is 2012).	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010	Jan 2010							
New Network Activation Action 5.4.1	Design, build, and install a dedicated high-speed data network for 33 institutions and CPHCS HQ. (Pilot started, completion date is 2012).					Jan 2009															March 2009				On Hold							Nov 2009		Jan 2009	Sept 2009	
Objective 5.5. Expand and Improve Telemedicine Capabilities																																				
Telemedicine Services Action 5.5.1	Improvement and expansion of telemedicine services for medical specialties and for mental health. (This project entails technical implementation for program enhancement).						March 2010						March 2010								March 2010					March 2010										
Goal 6 - Facilities																																				
Objective 6.1. Upgrade administrative and clinical facilities at each of CDCR's prison locations to provide patient-inmates with appropriate access to care																																				
Facilities Site activation Action 6.1.1	Provide permanent facilities to support the medical and mental care missions.	Jan 2010																															Nov 2009			

Project completed	
Project implemented	
Project start date or TBD (blank)	

**RECEIVER'S TURNAROUND PLAN OF ACTION MATRIX
ENTERPRISEWIDE PROJECT DEPLOYMENT as of November 15, 2009**

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.	In Progress	Jan-2010
Access to Care - Reception Center <i>Action 1.1.4</i>	Complete statewide implementation of the medical classification system throughout CDCR institutions.	In Progress	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.	N/A - Project not institution specific	Dec-2010
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	In Progress with CDCR
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.	EAW Reports Field Testing to begin 2nd Qtr 2010	Dec-2011
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.	In Progress	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

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ENTERPRISEWIDE PROJECT DEPLOYMENT as of November 15, 2009**

STATEWIDE	Description	Status	Completion Date
CPHCS Medical Contracting <i>Action 2.4.2</i>	Establish a Statewide basis approved contracts with specialty care providers and hospitals.	In Progress	Oct-2010
Specialty Care <i>Action 2.4.3</i>	Ensure specialty care and hospital providers' invoices are processed in a timely manner.	In Progress	Feb-2010
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.	In Progress	Jan-2010
Regional Leadership Structure <i>Action 3.2.2</i>	Establish and staff regional leadership structure.	In Progress	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.	In Progress	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.	In Progress	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 - In Progress	Phase I - July 2009 Phase II - July 2010

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STATEWIDE	Description	Status	Completion Date
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.	In Progress	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.	In Progress	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.	EAW Reports Deployment at two pilot sites not yet identified in 2nd Qtr 2010	Dec-2011
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

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STATEWIDE	Description	Status	Completion Date
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.	Project is being redefined and is in the Initiation Phase	Jun-2012
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.	N/A - Project not institution specific	May-2010
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 quick as possible
Begin Construction at First Site <i>Action 6.2.2</i>	Begin construction at first site.	Delayed	Delayed
Phase Construction Program <i>Action 6.2.3</i>	Complete execution of phased construction program.	In Progress	Apr-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	Nov-2009