



VOLUME 4: MEDICAL SERVICES	Effective Date: 01/2006
CHAPTER 6	Revision Date: 04/2015
4.6.1 PATIENT HEALTH CARE EDUCATION POLICY	Attachments: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I. POLICY

California Correctional Health Care Services (CCHCS) staff shall provide health education to patients regarding disease prevention, recommended treatment modalities, and available health care resources. The *Patient-Inmate Orientation Handbook to Health Care Services* shall be available in each institution law library and shall be provided to each patient within 14 business days upon arrival at any California Department of Corrections and Rehabilitation institution.

CCHCS shall determine the patient's specific health educational requirements and provide appropriate health education materials. Any education needs shall be reinforced and re-evaluated during follow-up visits. CCHCS shall refer the patient to other resources as needed for additional information, specialized instruction, or support, and provide patient education including, but not limited to, the following areas:

- Wellness/Prevention
- Newly diagnosed illness or disease
- Treatment plan (e.g., diet, medications, special appliances or equipment)
- Procedures, tests
- Pre and post-operative care
- Compliance with treatment plan
- Lifestyle changes
- Chronic disease morbidity reduction

CCHCS shall assess the patient's potential for understanding the health information provided, evaluate the patient's level of understanding and communicate effectively and appropriately based upon the patient's ability to understand. CCHCS staff shall document effective communication for patients identified with a Developmental Disability Program (DDP) code DD1, DD2 or DD3, a Disability Program Placement (DPP) code of DPV, DPH, DNH, DPS, a TABE score of 4.0 or less, or have a learning disability. CCHCS staff shall document all patient health education in the patient's health record.

II. PURPOSE

To promote wellness and empower patients to actively participate in their disease management and prevention.

III. RESPONSIBILITY

The Chief Executive Officer or designee of each institution is responsible for the implementation, monitoring, and evaluation of this policy.