APPENDIX E – USE CASES

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1.0 System Requirements

1.1 Approach and Methodology

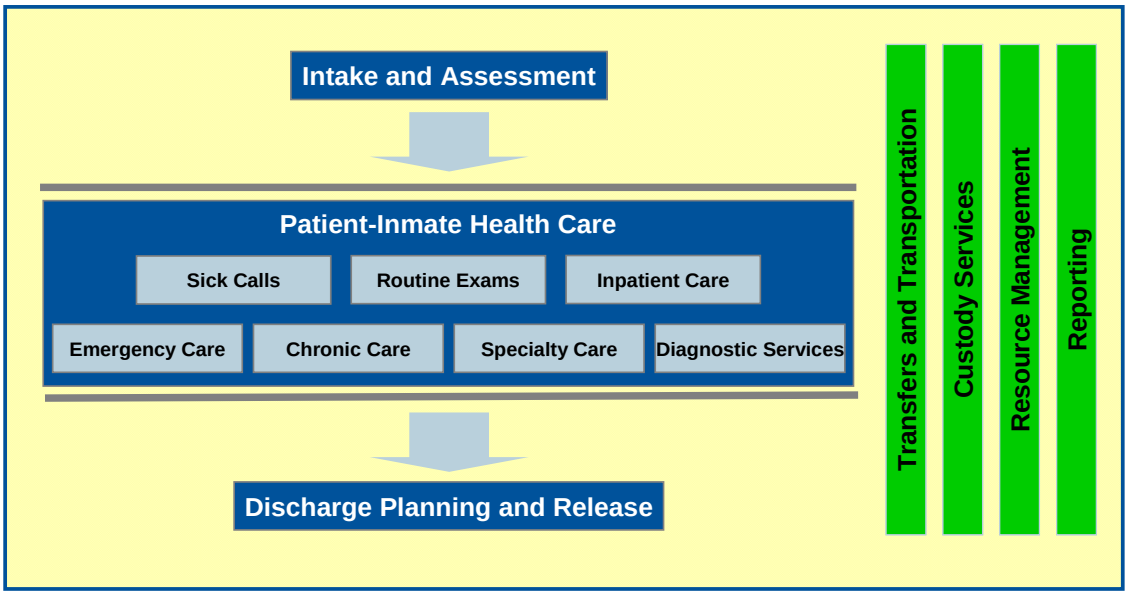
Gartner followed the Prison Health Care Lifecycle illustrated in Figure 1 when developing the use cases for the new system.

For each phase in the life of the case, requirements were captured using three different views:

- Business process flow
- Use Case view to depict the various actors and their intended use and functionality of the system
- Detailed functional requirements (not yet defined)

The intent is to provide internal stakeholders as well as vendors with as much information as possible about the California Department of Corrections & Rehabilitation (CDCR) and the requirements for the new Health Care Scheduling System (HCSS).

Figure 1. Prison Health Care Lifecycle



1.1.1 Business Process Flows

Gartner developed high level business process flows with the intent to document and capture the prison health care practice workflows. The workflows graphically describe:

- Workflow and Sequence of Activities (high level, system independent)
- Major Tasks and Activities
- Critical Decisions
- Hand-Offs with External Service Providers
- Milestones and Time-Lines
- Supervisory Review and Approval

- Forms and Documentations

The intent of the workflows is to provide stakeholders with a system independent view of the processes of CDCR. The business process flows for the processes discussed in this document were established in workshops with Subject Matter Experts (SME's) from the three health care disciplines (medical, dental, and mental health) as well as representatives from CDCR Custody and the SOMS project.

1.1.2 Use Case Methodology

While the Life of the Case Methodology is intent to describe the process of the business, the goal of the Use Case Method is to capture what the New System must do to support the processes. The Use Case captures the functionality of the system from a user point of view.

The purpose of this high level Use Case view is not to provide a particular design but rather to illustrate "*what* the system is expected to do, not *how*." Specifically, these Use Cases are intended to:

- Provide the vendor with a sufficient understanding of scope and complexity to allow accurate cost estimates.
- Provide the users with a common language to articulate their understanding of the system capabilities.
- Allow users to discuss what the system needs to do without being constrained by a particular design.

The Use Case approach includes a two-step process:

1. **Identification of Actors and Processes**
   - Determine all potential users of the new systems
   - Identify roles (a single user may have multiple roles)
   - Identify and list preliminary use cases
2. **Documentation of the Use Case**
   - The Use Case provides a description of the interactions between the user/actor and the system
   - The Use Case is an outside view of what the system does (not how it does it)
   - The Use Case must have a defined process owner who is responsible for approving the results
   - The Use Case defines the actors and association to actors
   - The Use Case is described using simple narrative language
     - The Use Case represents the complete course of events of the business process
     - The Use Case has a well defined starting point and well defined end point (Precondition and Post-condition)
     - The end point should represent a meaningful service delivered to the end user
   - The Use Case addresses alternative flows and/or optional courses of events

- The Use Case identifies interfaces with other systems

1.1.3 Terminology

The list below describes terminology used to develop the use cases and requirements.

- **Encounter** – Visit with any care provider, scheduled and non-scheduled
- **Request for Care** – Any request for an patient-inmate to meet with a care provider (sick call, referral, annual checkup, follow up, etc.)
  - A request for care is not yet scheduled
  - Note: a request for a particular service often has attributes such as:
    - Mandatory deadline
    - Must happen within a certain time interval, e.g., 5 - 10 days
    - The actual request may have pre-requisites such as radiology or lab report
- **Scheduled Appointment** – Actual scheduled appointment for a service (checkup, radiology, x-ray, therapy session, provider follow-up, ancillary services etc.)
  - A scheduled appointment may be recorded at the time of the appointment, e.g., a walk-in patient shows up at the Reception Center (RC) and as part of intake procedure an appointment is scheduled with the nurse who may be seen immediately
  - A scheduled appointment is always linked to an offender
- **Request pool** – Requests that have not yet been scheduled
  - Request pools may be linked to a clinic or not (e.g. requests for Telemedicine)
- **Resource** – A nurse, physician or a work-team (in a clinic) that can perform a set of activities to fulfill the objective of the “Request for Care”
- **Queue** – A logical set of scheduled or unscheduled appointments or requests lined up to be processed by a particular resource or group of resources for a particular time interval
  - A queue can be first in first out
  - Last in first out
  - Prioritized in any order
- **Workflow**
  - A workflow is sequence of events that is partially or fully automated
  - Workflow typically has triggers, a defined start and end point

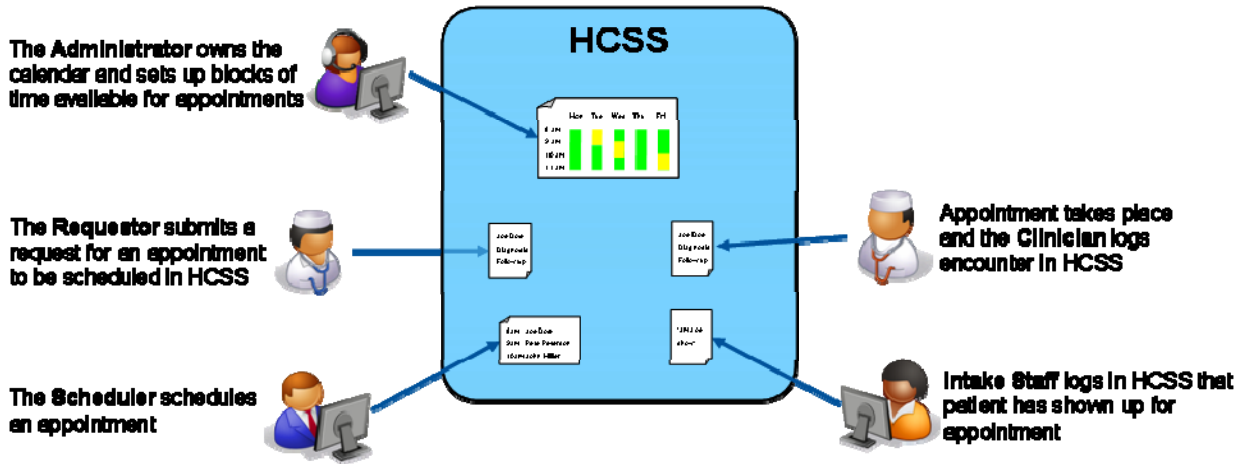
1.1.4 Actors and Roles

An actor is a person who interacts with the system, e.g. a Nurse, Clinician or Office Technician. An actor can access the system in multiple roles, e.g. an Office Technician could both administer the schedule of a clinic and schedule appointments. The role denotes specific

functions. Roles are useful when implementing workflow processes as tasks can be routed between workers performing different roles.

- **Administrator**
  - Owns the calendar of an institution, clinic or specific service provider
  - Is familiar with local settings and constraints
  - Knows what time blocks are available for scheduling
  - Knows when an appointment can be scheduled
- **Requestor**
  - Submits a requests for appointment to be scheduled
- **Scheduler**
  - Schedules an appointment
  - Does not need to be familiar with internal operations of clinic or institution
  - May schedule in two ways:
    - to an open slot in the system
    - manually by calling a service provider
- **Intake Staff**
  - Record show/no-show of patient at time of appointment
- **Clinician (or other Health Care Provider, e.g. Nurse, Radiologist, etc.)**
  - Records encounter including reason code for disposition (e.g. follow-on required, specialty care appointment requested, therapy ordered, etc.)

Figure 2. Conceptual view of the future scheduling process and interaction with the HCSS



1.2 Medical Care Actors and Use Cases

This section contains the use cases developed in workshops with Medical Care Subject Matter Experts. Table 2 provides an overview of the actors and use cases for the HCSS medical functionality.

Table 1. Overview of Medical Actors and Use Cases

Actor	Use Case
Bus Screen Nurse	Record RN Bus Screen
Scheduler	Schedule Medical Physical
Care Provider or designee	Record Medical Physical
Care Coordinator or designee	Transfer Offender (sending institution)
R&R Nurse	Record Transfer (receiving R&R)
Care Coordinator or designee	Transfer Offender (receiving institution)
Triage Nurse	Record CDCR Health Care Services Request Form #7362
Triage Nurse	Request for Service Triage
Requestor	Request to Schedule an Appointment
Scheduler	Schedule Appointment
Scheduler	Reschedule Appointment
Scheduler	Resolve Scheduling Conflict
Care Provider or designee	Record TTA Encounter
Care Provider or designee	Record Clinical Rounds Encounter
Administrator or designee	Assign Scheduler
Administrator or designee	Assign Time Blocks for Scheduling

1.2.1 Record RN Bus Screen

Actor
Bus Screen Nurse

Purpose and Objectives
The first encounter between an offender and CDCR health care providers occurs when offenders step off of the transport bus at the Reception Center (RC). However, the Strategic Offender Management System (SOMS) is notified in advance of which offenders will be arriving and the approximate time. Through integration with SOMS, the Health Care Scheduling System (HCSS) is notified and schedules a “RN Bus Screen” appointment for each offender arrival. It is assumed that at the event of an offender arrival, a calendar entry is made for each arriving offender to the Reception Center. That calendar entry can be sorted by the Reception Center so that the Bus Screening nurse can view all offenders who are planned to arrive at the RC.

As offenders leave the transport bus, custody officers check the offender into SOMS and a nurse conducts the RN Bus Screen on CDCR Form #7277 (includes medical, mental health, and dental information). The RN Bus Screen nurse records this information outside the HCSS. If the nurse determines an offender meets the criteria for further health care attention, the nurse selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., PCP examination, Psychological Evaluation, etc.).

Offenders that do not arrive on the bus are recorded at the end of the day as a “no-show” for their RN Bus Screen appointment, and a reason code is entered. Offenders who begin the RN Bus Screen but are unable to complete the appointment are recorded as “incomplete” or “missed.” This could be for a variety of reasons including custody related activities or any type of health related emergency occurring before the RN Bus Screen is complete. The RN Bus Screen is an appointment required to be completed before offenders are moved out of temporary reception housing, making it very important to track its completion and that every offender has received proper health care attention within the timeframes set in CDCR policies and procedures.

Offenders may also be required to go through various Health Screens (e.g., Medical Physical, Initial Mental Health Screen, etc.) that provide institutions with the information needed to ensure offender accommodations are appropriate (e.g., needs a lower bunk, or developmental disabilities requiring special care). It is envisioned that the HCSS will automatically generate a request for such appointments when HCSS is notified by SOMS of an incoming transport from the county jail.

Note, the system must be able to create reports on prisoners who arrived and completed the RN Bus Screen, PCP Medical Physical as well as exception reports on offenders who arrived at the RC and did not complete the RN Bus Screen or and/or Medical Physical

This use case assists the Bus Screen Nurse to record the RN Bus Screen.

Trigger Events
- An offender arrives at an institution on the bus from county jail.

Precondition

- HCSS has been notified of offender arrival and further required Screenings have been scheduled.

Post condition

- The RN Bus Screen and CDCR Form #7277 have been completed and the offender disposition is recorded in HCSS.

Use Case Flow

1. The Bus Screen Nurse logs into the system, brings up the offender display and records the fact that the encounter took place. If the record does not exist, see alternative flow.
2. The Bus Screen Nurse records the offender disposition in the system:
    a. Medical disposition:
        i. There is an emergency and the patient needs immediate care (e.g. TTA, CTC, etc.).
        ii. RN Bus Screen criteria are met requiring an offender referral for further evaluation.
        iii. The offender does not require any further evaluation.
    b. Dental disposition:
        i. There is an emergency and the offender needs immediate care (e.g. TTA).
    c. Mental Health disposition:
        i. There is a crisis and the patient needs immediate Mental Health care (e.g. TTA, CTC, MHCB).
        ii. RN Bus Screen criteria are met requiring an offender referral to CDCR Mental Health (e.g., Psychological Evaluation).
        iii. The offender does not meet the criteria for a Mental Health referral.
3. If a referral is required, the RN Bus Screen Nurse will create a referral for further evaluation in the system by selecting the “Request for Appointment” option.
    a. The Nurse shall specify the type of encounter.
    b. The system shall route an appointment request to the appropriate Scheduler.
4. Upon completion of the offender disposition, the system shall verify the existence of a request or scheduled appointment for the other required Reception Center screenings.
5. If further screenings are required, the system shall route an appointment request to a Scheduler (or a group of schedulers) for the required encounters.
6. The system shall track the completion status of the RN Bus Screen.

Associations to other use cases

- None

Alternative Flow

- If an offender record does not exist at time of arrival the HCSS system should have an interface to SOMS to allow the nurse to search SOMS for the offender record and down load it into HCSS without manual entry.
  - If a record is not in SOMS, the system shall prompt the Bus Screen Nurse to notify custody.

1.2.2 Schedule Medical Physical

Actor
Scheduler

Purpose and Objectives
After the RN Bus Screen, most offenders are required to have a Medical Physical (exceptions are determined by established criteria such as age, time since last physical, etc.). The HCSS automatically generates an appointment request for the Initial Medical Physical once prisoner transport is confirmed through interface with SOMS. The Physical must be completed within the timeframe prescribed in the policies and procedures.

In the HCSS, the Scheduler can view all Medical Physical requests listed in a queue. The queue may be sorted or searched by any of the request fields (e.g., offender name, appointment type, housing unit, due date, etc.). It is envisioned that the scheduler will schedule an appointment one or two days prior to the appointment occurring to allow custody to make adequate preparations. HCSS will have the capability to warn the Scheduler of any situation where there is a risk of missing mandated deadlines and ensure that these appointments receive the highest priority.

When the Scheduler selects a request, the system displays the available care providers who can perform the Medical Physical as well as associated blocks of time when they are available. The system will allow the Scheduler to select one offender or a group of offenders and schedule the Medical Physical without interaction with the care provider. It is assumed that HCSS can highlight appointment times where the offender and care provider are both available, taking into account the type of appointment, housing unit, security level, and time for escort.

The Scheduler selects an appointment time and schedules the Medical Physical on the provider's calendar. Once an appointment is scheduled, the interface between HCSS, SOMS, and CDCR allows the care provider to access offender and appointment information through the system. The provider and custody are notified of the new appointment to enable each to prepare (e.g., creating ducat lists, prepare equipment and facilities, etc.).

This use case assists the Scheduler to schedule the Medical Physical for an offender.

Trigger Events

- Request for a Medical Physical appointment received by Scheduler.

Precondition

- The RN Bus Screen has been recorded.
- A request for a Medical Physical has been generated in the system.

Post condition

- A Medical Physical is scheduled.

Use Case Flow

1. The Scheduler brings up the "Schedule Medical Physical" screen and the system shall display a queue of referrals to be scheduled.
    a. The system shall allow the Scheduler to sort or search the queue (e.g., by due date, appointment type, housing unit, etc.)
2. The Scheduler selects a request from the list and the system shall display a list of available care providers to conduct the Medical Physical.
3. The Scheduler selects a care provider and the system shall display the possible appointment times based on the offender calendar and availability of the care provider.
    a. The system shall indicate if an appointment is in conflict with mandated timelines.
    b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will then schedule the appointment.
5. The system shall schedule the appointment on the care provider and offender calendars.
6. The system shall notify custody/housing unit representatives, medical records, the appropriate clinic, and provider(s) of the scheduled appointment (generate a ducat list).
    a. The system shall notify appropriate personnel (Associate Warden of Health Care Services, and/or ADA Coordinator) if the offender requires accommodations, e.g., interpreter, wheel chair.

Associations to other use cases

- None

Alternative Flow

- A scheduler may contact the care provider and negotiate a time not on the schedule.
    - The system should not restrict scheduling to only times shown as available.
    - The system needs to notify the clinic(s), custody, and others involved about potential scheduling conflicts.

- ❑ The system needs to notify the clinic(s), custody, and others of housing or bed moves that occur after scheduling or issuance of the ducats.

1.2.3 Record Medical Physical

Actor
Care Provider or designee

Purpose and Objectives

All offenders have a request for a Medical Physical appointment automatically generated by HCSS at the time of arriving at the RC. The RC Nurse may deem the Physical unnecessary for some offenders and close out the appointment request. The Nurse may allow other offenders to receive the Medical Physical. Once the Medical Physical has been scheduled, the appointment occurs. All offenders are required to undergo a medical examination like the Medical Physical to provide institutions with the information needed to ensure quality care. Information from the Medical Physical is used to generate CHRONO (CDCR form 128) records that inform custody of limited medical information that is material to their interactions with the offender. These CHRONOs are updated on a regular basis and stored outside of HCSS.

Offenders do not always arrive at their appointments. Offenders that do not arrive at the Medical Physical are recorded in HCSS as a “no-show” and a reason code is entered. Custody is notified of each “no-show.” Offenders do not show up for appointments for a number of reasons, such as appointment conflicts, transfers, or offender refusal. If the Offender does arrive, the Medical Physical is conducted by the care provider. The care provider records the offender’s attendance and disposition. If the care provider determines an offender meets the criteria for further medical attention, the provider selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., follow-up, specialty care referral, PCP appointment). If there does not appear to be any issues for the offender after the Medical Physical, the Care Provider closes out the current appointment.

This use case assists the Care Provider to record the Medical Physical.

Trigger Events
- The offender shows up for the Medical Physical appointment.
- Appointment time has come and the offender does not show up, see alternate flow.

Precondition
- The Medical Physical has been scheduled.

Post condition
- Medical Physical has been conducted and the disposition is recorded in the system.
- A request for appointment is generated if further attention is needed.

Use Case Flow

1. The Care Provider conducts the encounter and completes all required documentation outside the system.
2. The Care Provider will log into the HCSS and bring up the appointment to record the encounter in the system:
    a. Show/no-show
    b. Duration of the encounter
3. The Care Provider records the disposition:
    a. There is an emergency and the offender needs immediate medical care (e.g. TTA, CTC, etc.)
    b. The offender requires further medical care (e.g., chronic care, specialty care, PCP follow-up, etc.) see #4 below.
    c. The offender does not need further medical care at this time and defaults to periodic screening.
4. If the offender requires further medical care, the Care Provider will write an order specifying the details (type, timing, etc.) outside the system, and enter a request for appointment in the system.
    a. The system shall route the appointment request to the appropriate Scheduler.

Associations to other use cases

- None

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Medical Care Provider to enter the reason for no-show (drop down with approx. 12 reasons).
    - The system shall then notify custody of no-shows.
    - If refusal, the system shall prompt for the offender to be seen to sign the refusal form and for educational counseling.
    - If rescheduling is required, the system shall route the request to the appropriate scheduler.
- The system shall notify and prompt the offender's Care Coordinator to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.2.4 Transfer Offender (sending institution)

Actor
Care Coordinator or designee

Purpose and Objectives

Offender transfers between CDCR institutions provide a significant challenge to the continuity of quality offender health care. Within a single institution, care providers are able to navigate the dynamic environment of scheduling offenders across three health disciplines and a custody system by often relying on established relationships and communications that were fostered by close proximity. Those relationships and communications do not often extend between institutions, which may be more than 500 miles apart. HCSS provides an opportunity to effectively communicate information about an offender's pre-transfer schedule to a receiving institution, while allowing resources to be efficiently re-tasked by the sending institution.

Offenders sometimes transfer with little prior notice, or with a great deal of notice and postponements. Because of this variability, care providers must continue scheduling appointments, meetings, and treatment until the offender is actually transferred. When an offender is expected to transfer, HCSS will be notified through its interface with SOMS. HCSS will alert the offender Care Coordinator to prepare for the actual transfer by performing a chart review, completing CDCR Form #7371, and reviewing the HCSS for all pending and scheduled appointments. If medically indicated, the Care Coordinator will prepare a medical hold to prevent transfer. If a Medical Hold is not indicated and the transfer is expected to occur, the Care Coordinator will log into HCSS and select the offender. The system will display all pending and scheduled appointments and the Care Coordinator will select to suspend them and enter a reason code (transfer). The system will record the name, date, and time of the person who suspended the appointments. The system will route notifications to all clinical staff assigned to the offender about the suspensions and transfer, to allow for an efficient reallocation of appointments to other offenders in need. Information on previously scheduled and suspended appointments will be made available to the receiving institution. The system will notify the sending institution Care Coordinator if the transfer does not occur so the suspended appointments can be returned to the schedule.

This use case assists the Care Coordinator to record an offender transfer.

Trigger Events

- Offender transfers

Precondition

- Offender pending transfer has been recorded in SOMS
- The Care Coordinator has been notified of pending transfers (inbox shows cases of pending transfers)
- Care Coordinator has access to all scheduled appointments incl. reason for appointment

Post condition

- Pending appointments with sending institutions have been suspended and receiving institution is notified to reschedule pending appointments.

Use Case Flow

1. The Care Coordinator logs into HCSS and brings up the queue with offenders to be transferred.
2. The Care Coordinator selects an offender from the list.
3. The system shall display all pending requests and scheduled appointments.
4. The system shall display the option to suspend all or selected pending and scheduled appointments.
    a. For temporary transfers (e.g., out to court, etc.) the Care Coordinator may suspend appointments only for the time period associated with the offender absence.
    b. The system will notify of any urgent appointments being suspended.
    c. The system shall allow the entry of a reason code for suspended actions.
    d. The system shall track the date, time, and name of the person who suspended the appointments.
5. The system shall notify all clinical staff assigned to the offender about the cancellations and transfer.
    a. The system will notify the Care Coordinator if transfer does not occur so appointments can be returned to the schedule.

Note: It is assumed that when the offender is assigned to the receiving institution Care Coordinator, the Care Coordinator can view a complete appointment history including status (e.g. suspended appointments as a result of transfer). It is the assumption that the receiving Care Coordinator is responsible for determining next actions.

Associations to other use cases

- Predecessor to “Record Transfer (R&R receiving)

Alternative Flow

- The Care Coordinator may request a hold for medical reasons.
- In the case of release or parole, the scheduled and pending appointments will be canceled at the actual time of release. Their prior existence will remain in the HCSS offender log.

1.2.5 Record Transfer (receiving R&R)

Actor
R&R Nurse

Purpose and Objectives
SOMS will notify HCSS of the pending and actual transfer of an offender. The offender will arrive at the receiving institution’s R&R, where the R&R Nurse will screen the offender for health

care related issues and needs. After the screening, it is envisioned that the R&R Nurse will log into HCSS to record the arrival and encounter related to the completed transfer, followed by the Nurse requesting any further evaluations deemed necessary. The system will record the Nurse's name and the date and time of arrival. It is envisioned that the system will automatically generate requests for a Care Coordinator assignment and a Medical Physical (if medically indicated). The system will route these requests, and any further encounters requested by the R&R Nurse, to the appropriate schedulers.

This use case assists the R&R Nurse to record offender transfer at the receiving institution.

Trigger Events

- The offender arrives at the receiving institution.

Precondition

- The prison to prison offender transfer has been recorded in SOMS.
- The offender has been transferred.

Post condition

- The offender has been received, housed, and an R&R screen has been scheduled.

Use Case Flow

1. The R&R nurse brings up the queue of offenders being received.
2. R&R Nurse conducts screen.
3. The R&R nurse selects the offender from the list and marks that the offender has arrived and the disposition.
    a. There is an emergency and the patient needs immediate care (e.g. TTA, CTC, etc.).
    b. Screen criteria are met requiring an offender referral for further evaluation.
    c. The offender does not require any further evaluation.
4. The system shall:
    a. Generate a request for an appointment if the R&R Nurse indicates need.
    b. Generate a request for a Care Coordinator to be assigned.
    c. The system shall notify the Scheduler(s) of appointment requests (pre-transfer pending appointments and potential new appointments).

Associations to other use cases

- Successor to Record Transfer (sending institution)
- Predecessor to Record Transfer (receiving institution)

Alternative Flow

- None

1.2.6 Transfer Offender (receiving institution)

Actor
Care Coordinator or designee

Purpose and Objectives
Offenders are frequently received from other institutions with very little accompanying health information. This lack of information results in the receiving institution having to schedule and perform screenings and evaluations as if the offender were new to the CDCR system so that quality health care is assured. In reality, the same tests may have been performed a few days previously at the sending institution. HCSS records all scheduled and pending appointments and clinical encounters, creating a window into the past for receiving institutions to be able to verify that necessary encounters have taken place and when. This HCSS log of offender activity is envisioned to be accessible by receiving Care Coordinators to determine next steps once the offender has transferred.

HCSS will be notified by SOMS when an offender is expected to arrive at a receiving institution. A Care Coordinator will be assigned and will monitor when the offender has arrived. When the transfer is complete, an assigned Care Coordinator will log into HCSS, select the offender, and review the pre-transfer pending and canceled appointments. The Care Coordinator will be responsible for deciding which, if any of the appointments, should be requested at the new institution. The system will allow the Care Coordinator to select appointments to request, and will route the appointment requests to the appropriate scheduler.

This use case assists the Care Coordinator to request scheduling of pre-transfer pending or canceled appointments at the receiving institution.

Trigger Events

- Offender arrives at receiving institution

Precondition

- Offender transfer has been recorded in SOMS
- Scheduled and pending appointments at the sending institution have been suspended.

Post condition

- Scheduler at receiving institutions has requested pre-transfer scheduled and pending appointments be scheduled.

Use Case Flow

1. The Care Coordinator logs into HCSS and brings up the queue with newly arrived offenders from other institutions.

2. The Care Coordinator selects the offender from the list.
3. The Care Coordinator will review the pending and suspended appointments from the previous institution.
4. The system shall allow the Care Coordinator to select a previously scheduled or pending appointment from the sending institution in order to generate a new request at the receiving institution.
    a. The system shall allow for the cancellation of pre-transfer scheduled or pending appointments with reason code.
        i. The system shall record the user name, date, and time of cancellation.
    b. Newly generated requests will maintain the information contained in the original request, including due date, etc.
5. The system shall route any generated requests to the assigned Scheduler.

Associations to other use cases

- None

Alternative Flow

- None

1.2.7 Record CDCR Health Care Services Request Form #7362

Actor
Screening Nurse

Purpose and Objectives
Offenders fill out a CDCR Health Care Services Request Form #7362 when they would like to see a care provider. The forms are available at multiple locations throughout an institution. Offenders fill out their name, CDCR#, housing unit, date, the type of care sought (Medical, Psychiatry, Dental, or Pharmacy) and the reason they are requesting the visit. Some levels of care allow for verbal requests because of physical restraints or offender disability, and often in that situation a request is written on the offender's behalf. All request forms are deposited in a drop box that is required by policies and procedures to be emptied once a day, but is usually checked at least 2 or 3 times daily.

The Screening Nurse views each request and enters it into HCSS, being sure to fill out each entry including the target discipline (dental, medical, etc.). The system will then route the requests to the indicated disciplines where they will decide on further actions. The #7362s will join staff & custody referrals in the queue of "Sick Call Referrals & Requests." The collection and sorting of the requests should be tracked by the system to ensure compliance with policies and procedures.

This use case assists the Screening Nurse to record a CDCR Health Care Services Request Form #7362 in the HCSS.

Trigger Events

- The offender has completed the CDCR Health Care Services Request Form #7362.

Precondition

- None

Post condition

- The Nurse has recorded the #7362 and the Scheduler is notified.

Use Case Flow

1. The Nurse brings up the "Record CDCR Form #7362" screen and searches for the offender who submitted the 7362.
    a. The system shall allow the Nurse to search for the offender by housing unit, name, CDCR#, alias, location, etc.
2. The system shall display a list with matching names and the Nurse will select the name of the offender who has filed the #7362.
    a. Offender, date, and time of the #7362 submission shall be recorded by the system.
    b. The system shall display any previously filed requests by the same offender since last being seen by a case manager or clinician.
        i. The nurse shall have the capability to link a new request to an existing pending request.
3. The system shall display a template for the Nurse to enter information from the #7362 form:
    a. Type of request (1 or more):
        i. Medical
        ii. Psychiatry
        iii. Dental
        iv. Pharmacy
    b. Reason for requesting health care services.
4. The system shall record the date, time, and name of the nurse who reviewed and entered the #7362 information.
5. The system shall forward requests to the appropriate health care disciplines to be reviewed.

Associations to other use cases

- This use case is a predecessor to “Record Sick Call Referral Request & Triage.”

Alternative Flow

- Offenders may also use kiosks available to them in the housing unit to enter requests for health care themselves. In this case, requests are routed directly to the respective discipline(s).

1.2.8 Health Care Service Request Triage

Actor
Triage Nurse

Purpose and Objectives
A nurse collects all offender Heath Care Service Request (CDCR Form #7362), enters them into the HCSS, and the system routes the requests to the correct disciplines. Each discipline receives these requests in a “Sick Call Referrals & Requests” queue. Also within the queue are other appointment requests and referrals such as: staff & custody referrals based on offender observations, verbal self-referrals from offenders entered into the system, requests originally written on napkins, or any other offender act used to be referred to a Care Provider.

The Triage Nurse is able to sort and search the “Sick Call Referrals & Requests” queue based on any fields (Due Date, CDCR#, Offender Name, etc.). A “reason for request” summary appears in the queue display to allow the Triage Nurse to survey all requests and triage them into emergent, urgent, and routine categories of needed care. Emergent requests are dealt with first and require immediate emergency attention. Most emergent situations are recognized and dealt with outside of the HCSS appointment request process. If an offender’s emergent health needs are not recognized until request triage, the Triage Nurse will initiate emergency processes: custody will be notified to locate the offender and escort them to the TTA if possible, the Physician-on-call will be notified, and HCSS will suspend scheduled offender appointments and notify affected clinics. The emergent status of the request will be recorded in HCSS.

If the Triage Nurse determines a request to be urgent, the system will immediately note the urgency of the request and route it the scheduler. The requesting offender’s Care Coordinator will also be notified and the request due date will reflect an urgent need. The urgent status of the request will be recorded in HCSS. The Scheduler will schedule the appointment as soon as possible, and may manually contact care providers to ensure availability within policy and procedure timeframes.

If a request is classified as routine, the system shall route the request to a scheduler. The routine status of the request will be recorded in HCSS. The offender’s Care Coordinator will be notified and the appointment request due date will be set within the timeframe set by policies and procedures.

This use case assists the Triage Nurse to record and schedule a triage encounter for Sick Call Requests and/or Referrals that have been received.

Trigger Events

- Health Care Services Request form or other request/referral for care is delivered to the Triage Nurse.

Precondition

- Health Care Services Request form has been recorded in the system.

Post condition

- Health Care Services Request form is date and time stamped and routed to the appropriate Scheduler.

Use Case Flow

1. The Triage Nurse logs into the system and opens the queue of "Sick Call Referrals & Requests."
    a. The system shall display requests in the order of the time they were submitted for each housing unit.
2. The system shall allow for the list of requests to be displayed with "Reason for Request" summary information to aid the Nurse's assessment of each request's severity.
    a. The system shall display related and duplicate #7362 requests.
    b. The nurse will do a preliminary prioritization of offender requests.
3. The Triage Nurse will see all offenders who submitted a CDCR form # 7362 with symptoms noted.
    a. Each offender must be seen face-to-face by the Triage Nurse if symptoms were noted on the 7362.
    b. The order offenders are seen will be determined by the Triage Nurse.
    c. The Triage Nurse or designee may enter requests in HCSS for face-to-face appointments to be scheduled within mandated timeframes.
    d. All face-to-face encounters will be recorded, though some may be unscheduled if urgency requires.
4. Upon seeing the patient-inmate, the Triage Nurse will log in and select a request and the system shall display the options of routine, urgent, or emergent for PCP referral.
    a. If emergent, custody contacted to take the offender to the TTA.
    b. If urgent, the system shall notify the Scheduler to schedule a PCP appointment within 72 hours.
    c. If routine, the system shall notify the Scheduler to schedule a PCP appointment within 14 days.
    d. If the matter is resolved by the Triage Nurse during the face-to-face encounter, CDCR form #7362 shall be closed out.
5. The system shall record the date and time of each request's viewing by the Triage Nurse and the date and time of the face-to-face triage.

6. The system shall route any and all appointment requests to the appropriate Scheduler.

Associations to other use cases

- Successor to "Record CDCR Health Care Services Request Form #7362."

Alternative Flow

- In the future, a mobile device may be used by the Nurse to allow for information to be entered in the system regardless of Nurse location.

1.2.9 Request to Schedule an Appointment

Actor

Requestor

Purpose and Objectives

Routine appointment requests will be automatically generated by HCSS and routed to the appropriate scheduler. These automatic requests are based in policy and procedure requirements, such as preventative screenings required every 1 or 2 years depending on an offender's age, chronic care, or the required periodic appointments while an offender waits for a specialty care visit to be approved. When other circumstances require an appointment, the Requestor will log into HCSS and request an appointment to be scheduled.

Once they are logged into the system, the Requestor will select an offender and type of appointment. The system will suggest required attendees based on care providers currently assigned to the offender and offender location. The Requestor is free to select from the suggested attendees, or search for other care providers to invite. The Requestor may also select care providers as optional attendees to allow the Scheduler greater flexibility in scheduling (it is harder to set an appointment time when there are many required attendees). After selecting the attendee(s), the Requestor will enter a preferred range of times for the appointment to be held (the system shall alert the Requestor if the preferred times are outside of those in the policies and procedures). The appointment request will be routed to the Scheduler to set up the meeting.

This use case assists the Requestor with requesting an appointment.

Trigger Events

- The Requestor determines circumstances warrant an appointment (e.g., a need for specialty care, lab work, radiology, dental work, psychiatric care, etc.).

Precondition

- Circumstances require an appointment.

Post condition

- An appointment has been requested.

Use Case Flow

1. The Requestor logs into HCSS and brings up the “Appointment Request” screen.
2. The system shall display and allow offenders to be sorted and searched, allowing the Requestor to select the offender for whom the appointment is needed.
3. The Requestor shall indicate the type of appointment needed (lab, radiology, etc.).
4. The system shall then suggest provider(s) based on assigned clinicians, offender location, etc., and allow the Requestor to select required and optional attendees. (e.g., for offender peer-education programs, Pain Management, Specialty Care, Telemedicine, etc.)
    a. The system shall allow for the invitation of additional attendees.
5. The system shall prompt the Requestor for a preferred range of appointment dates within mandated timeframes.
6. The system shall prompt the Requestor to indicate any dependent appointments (e.g., labs to be completed prior, etc.)
    a. The system shall verify dependant appointments are scheduled, or notify the scheduler to generate a request if not.
7. The system shall generate the appointment request.
    a. If the appointment requires approval from a regulating individual or committee (e.g., Utilization Management, DAR, etc.) the system shall route the request to the appropriate person(s) for approval.
        i. If policies and procedures dictate, the system will generate automatic appointment requests during the wait time associated with specialty care approval to ensure the offender’s condition remains stable.
        ii. If approved, the request will be routed by the system to the appropriate Scheduler.
        iii. If declined, see alternative flow.
    b. If the appointment does not require prior approval, the system shall route the request to the appropriate scheduler.

Associations to other use cases

- Predecessor to “Schedule Appointment.”

Alternative Flow

- If an appointment request requires approval that is ultimately denied, the regulating committee will enter the decision into the system.
    - The appointment request will be canceled, by reasons of the regulating committee.

- The date and time of cancellation will be recorded, as well as the name of the deciding person or committee.
- The original Requestor will be notified of the decision.

1.2.10 Schedule Appointment

Actor
Scheduler

Purpose and Objectives
An appointment can be scheduled for any type of care (e.g., PCP visit, Dental exam, Mental Health Case Manager, etc.). A request is created in HCSS and assigned a specific due date based upon policies and procedures. A request may include a single appointment or a series of appointments (e.g. 10 structured physical therapy sessions). The request is routed to a scheduler whose role is to minimize conflicts while scheduling appointments to be completed within policy-specified limits.

The Scheduler logs into HCSS and selects the “Schedule Appointment” queue, and then selects and views a request by housing unit. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). If a Care Provider is not specified, the Scheduler may “select all” providers and view all provider availability for the appointment by time slot. The system shall then display the available appointment times. If a specific Care Provider and time are requested, the Scheduler may manually contact the parties involved if the current schedules conflict with the request. The Scheduler will select an appointment time and schedule the appointment on the offender and provider calendars. A notification of the new appointment will be sent by the system to the offender’s Case Manager/Care Coordinator (if existing), the Care Provider scheduled, medical records, and to custody to generate the ducat.

This use case assists the Scheduler with scheduling an appointment.

Trigger Events
- Request received in Scheduler’s inbox

Precondition
- Request has been generated by a Requestor

Post condition
- Appointment is scheduled

Use Case Flow

1. The Scheduler brings up the “Schedule Appointments” screen and the system shall display a queue of appointment requests to be scheduled.

   a. The system shall allow the Scheduler to search or sort the request queue by any field (housing unit, due date, offender, Care Coordinator, required participants, etc.).

2. The Scheduler selects a request from the queue and the system shall display a list of available care providers to conduct the appointment, report a requested provider if any, and suggest some providers based on offender information (e.g., housing unit, current level of care, assigned providers, previous providers etc.).
3. The Scheduler selects a care provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
   a. The system shall indicate if a suggested appointment is in conflict with mandated timelines.
   b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will schedule the appointment.
5. The system shall schedule the appointment on the Care Provider and offender calendars.
6. The system shall notify custody/housing unit representatives, clinic, medical records, the appropriate clinic and provider(s) of the scheduled appointment (generate a ducat list).
   a. The system shall notify nursing of any pre-visit preparations
   b. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.
   c. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.2.11 Reschedule Appointment

Actor
Scheduler

Purpose and Objectives
An appointment may need to be rescheduled for a variety of reasons such as, mandatory court hearings, emergencies, appointments of higher priority, institution lockdowns, or other events resulting in an offender “no-show” at a scheduled appointment. In the case of an event like an institution lockdown, the Scheduler will be allowed to move large blocks of appointments to other days. When an individual offender is recorded as a “no-show,” the system will

automatically generate a new request for that appointment, maintaining the information and due date of the original request. The request will be identifiable to a scheduler as a request to reschedule.

The Scheduler logs into HCSS and selects the “Reschedule Appointment” queue, and is able to search and/or sort the queue by any request field (date, housing unit, offender, Case Manager, required participants, etc.). Appointments needing to be rescheduled will have due dates that are closer to expiration than other requests and may therefore have a higher priority. The Scheduler selects and views the request. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). HCSS will suggest and highlight the provider previously scheduled when rescheduling an appointment. If a care provider is not specified, the Scheduler may select “all clinic providers” and view provider availability for the appointment by time slot. The system shall then display the available appointment times. If there are no available appointment times due to the shorter timeframe of rescheduling, the Scheduler may manually contact the parties involved to ensure the appointment is scheduled before the due date. The Scheduler will select an appointment time and schedule the appointment. A notification of the new appointment will be sent by the system to the offender Case Manager/Care Coordinator (if existing), the Care Provider scheduled, Medical Records and to custody to generate a ducat.

This use case assists the Scheduler to reschedule an appointment for an offender.

Trigger Events

- An offender is recorded as a “no show” for an appointment.
- An appointment has been cancelled

Precondition

- An appointment has been scheduled for an offender

Post condition

- An appointment is rescheduled before the due date (unless impossible to meet deadline)

Use Case Flow

1. The Scheduler logs into HCSS and brings up the “Reschedule Appointments” screen and the system shall display a queue of appointment requests to be rescheduled by housing unit.
    a. The system shall allow the Scheduler to search or sort the request queue by any field (date, offender, housing unit, Case Manager, required participants, etc.).
    b. Appointments needing to be rescheduled will maintain the due date of the original appointment request and all other information (dependencies, etc.)
2. The Scheduler selects a request from the queue and the system shall display a list of available care providers and suggest providers based on offender information (e.g., housing unit location, current level of care, assigned providers, etc.).

   a. The system shall highlight the Care Provider previously scheduled for the appointment
3. The Scheduler selects a Care Provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
   a. The system shall indicate if an appointment is in conflict with mandated timelines.
   b. The system shall indicate if there are potential scheduling conflicts.
   c. The system shall indicate if there are unscheduled dependencies and prompt for a request to be generated for scheduling.
4. The Scheduler will schedule the appointment.
5. The system shall schedule the appointment on the Care Provider and offender calendars.
6. The system shall notify custody/housing unit representatives, medical records, the appropriate clinic and provider(s) of the scheduled appointment (generate a ducat list).
   a. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.
   b. The system shall notify nursing of any pre-visit preparations
   c. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.2.12 Resolve Scheduling Conflict

Actor
Scheduler

Purpose and Objectives
Although coordination of scheduling among the various health care disciplines and insight into an offender's calendar will greatly reduce scheduling conflicts from occurring in the first place, conflicts will still happen in the future due to changing offender commitments, constrained availability of certain care providers, or because an offender has missed several previously scheduled appointments.

The system shall notify schedulers of these conflicts and allow the routing of these appointment requests to a Scheduler for resolution. While the actual resolution will remain a manual process, including phone calls and possible in-person meetings by a conflict resolution team, the system

shall allow the Scheduler to record the steps taken to resolve the conflict in the system. The system shall also have the capability to route proposed resolutions to a supervisor for approval. Upon resolution of the conflict, the Scheduler will schedule the appointment in the system.

This use case assists the Scheduler to enter a conflict resolution in the system and reschedule the appointment.

Trigger Events

- None

Precondition

- A health care appointment has previously been scheduled and another, conflicting commitment has appeared on the offender calendar.
- A health care appointment cannot be scheduled within mandated timeframe due to other offender commitments.

Post condition

- The scheduling conflict has been resolved and the health care appointment is scheduled.
- If mandated timeframes have been violated due to a scheduling conflict, a reason is entered in the system.

Use Case Flow

1. The Scheduler brings up the “Scheduling Conflict Resolution” screen and the system shall display a list of appointments that currently have a scheduling conflict.
2. The Scheduler selects an appointment from the list and the system shall display offender name, housing unit, appointment type, care provider requested, and due date of appointment.
3. The Scheduler will then do one or several of the following (outside the system):
    a. Contact other care providers if the conflict can be resolved by rescheduling other health care appointments.
    b. Contact custody to see if another offender commitment can be rescheduled.
    c. Contact the requested care coordinator and/or provider to see if another appointment time is available.
    d. Forward the conflict to be resolved by an interdisciplinary conflict resolution team.
4. If the scheduling conflict can be resolved, the scheduler will schedule the appointment in the system.
5. If the conflict cannot be resolved, the Scheduler will schedule the appointment at a time after the mandated deadline.
    a. The system shall prompt the Scheduler to indicate the reason for missing the deadline.

   b. The system shall allow the Scheduler to document the steps and measures taken to resolve the conflict in a manner that would have allowed complying with the mandated timeline.

6. The system shall schedule the appointment on the care provider and offender calendars.
7. The system shall notify custody/housing unit representatives, medical records, clinic and provider(s) of the scheduled appointment (generate a ducat list).
   a. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.
   b. The system shall notify nursing of any pre-visit preparations
   c. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.2.13 Record TTA Encounter

Actor
Care Provider or designee

Purpose and Objectives
It is impossible to schedule emergencies; therefore, encounters between an offender taken to the Triage and Treatment Area (TTA) and the Care Provider-on-call cannot be formally requested or scheduled. The encounters can, however, be recorded after their occurrence in order to inform current treatment and report on offender access to care. Offenders are taken to the TTA for emergency care regardless of discipline. Offenders that arrive are evaluated and treated by the TTA Care Provider on duty, or the after hours Care Provider-on-call.

After treating the offender in the TTA, the Care Provider will log into HCSS and search for the offender's record. After locating and selecting the offender, the system will prompt the Care Provider to indicate that an encounter took place and allow the Care Provider to indicate if further evaluation is needed. HCSS will track the date, time, and name of the Care Provider who conducted the encounter. The Care Provider will be prompted to consider an appointment request if further evaluation is needed. After possibly generating an appointment request, the offender's Care Coordinator/Case Manager will be notified of the encounter. Any appointments requested will be routed to the appropriate scheduler.

This use case assists the Care Provider to record the TTA Encounter.

Trigger Events

- Offender brought to TTA for emergent treatment

Precondition

- None

Post condition

- Offender treated in the TTA by the Care Provider and the disposition is recorded in the system.

Use Case Flow

1. The Care Provider conducts the encounter and completes all required documentation outside of HCSS.
2. The Care Provider will log into HCSS and bring up the offender to record the encounter in the system:
    a. The event occurred—including date, time, and provider name.
    b. Duration of encounter
3. The system shall allow the Care Provider to generate requests if encounter outcomes warrant:
    a. Follow-up visit(s)
    b. Appointment(s) by discipline
    c. Transfer for specialty care
4. The system shall notify:
    a. The Scheduler to schedule further appointments
    b. The offender Care Coordinator/Case Manager (if existing)
    c. The Specialty Care Administrator if applicable

Associations to other use cases

- None

Alternative Flow

- None

1.2.14 Record Clinical Rounds Encounter (OHU, CTC, GACH)

Actor

Care Provider/Care Coordinator or designee

Purpose and Objectives

Care Providers conduct daily rounds to assess offender health and progress with current treatment. Because of the informal process of meeting with patients, the scheduling of Care Provider rounds is not within the HCSS scope. However, the record of these encounters between Care Providers and offenders is useful for assessing the quality and access to care provided to offenders and should be tracked.

After completing a series of offender encounters while on rounds, it is envisioned that the Care Provider or designee will log into HCSS and display a list of all offenders currently located at the in-patient housing. The Care Provider will select all offenders encountered during rounds and select the encounter type "Clinical Rounds." For each offender, the system will prompt the Care Provider to record the encounter took place and allow the Care Provider to indicate if further evaluation is needed. HCSS will also track the date, time, and name of the Care Provider conducting the encounter. The Care Provider will be prompted to consider an appointment request if further evaluation is needed. Each offender's Care Coordinator/Case Manager will be notified of the encounter and any appointments requested.

This use case assists the Care Provider to record encounters with offenders occurring during clinical rounds in an OHU, CTC, or GACH.

Trigger Events

- Care Provider has completed clinical rounds

Precondition

- Care Provider is scheduled for clinical rounds

Post condition

- Clinical rounds are recorded in the system.

Use Case Flow

1. The Care Provider conducts all offender encounters and completes all required documentation for rounds outside the HCSS.
2. The Care Provider logs in to the system and brings up the list of offenders currently located at the in-patient housing.
3. The system shall allow the Care Provider to select all offenders visited during rounds and allow the Care Provider to select the encounter type "clinical rounds."
4. For each offender, the system shall prompt the Care Provider to indicate that the encounter took place.
    a. The system shall record date, time, and Name of the Care Provider who conducted rounds.
5. The system shall allow the Care Provider to indicate if further evaluation is required.
    a. If further evaluation needed, the system shall allow the Care Provider to request an appointment.
6. The system shall notify the Care Coordinator of the request.

7. The system shall route the request to the Scheduler.

Associations to other use cases

- None

Alternative Flow

- None

1.2.15 Assign Scheduler

Actor
Administrator or designee

Purpose and Objectives
Requests for appointments can be generated by various actors, such as the 7362 Triage Nurse, a clinician who requests a follow up appointment, a utilization manager who approves a specialty care appointment etc. The requests will indicate the type of appointment as well as the mandated timeframe in which the appointment must occur. Appointment requests of the same type form a pool of requests that will be scheduled by a Scheduler.

The HCSS shall have the capability to organize the requests by appointment type, discipline, offender location, time of appointment, urgency, care provider, specialist etc. Request pools will be assigned by a Supervisor to Schedulers who have the responsibility to schedule the appointments. Schedulers should be able to schedule appointment regardless of their location, thereby allowing for a centralized approach to scheduling for telemedicine and specialty care appointments.

This use case assists the Supervisor to assign a Scheduler to a pool of requests to be scheduled.

Trigger Events
- None

Precondition
- Schedulers are in the system, including their location, specialty and other relevant skills (e.g. language).
- Request pools have been defined.

Post condition
- A scheduler has been assigned to one or multiple request pools and the Scheduler is notified.

Use Case Flow

1. The Supervisor brings up the "Assign Scheduler" screen and the system shall display a list of all request pools.
2. The Supervisor selects a request pool from the list.
    a. The system shall indicate if this request pool is already assigned to a scheduler.
    b. The system shall display a list of schedulers who have the appropriate authorization and skills to schedule appointments for the selected request pool.
3. The Supervisor will then select a Scheduler from the list and assign him/her to the pool of requests.
    a. The system shall allow the Supervisor to assign one or multiple schedulers to a pool of requests.
    b. The system shall allow the Supervisor to assign a primary and secondary Scheduler to a pool of requests.
4. The system will notify the Scheduler of the assignment and the newly assigned request pool will become part of that Scheduler's workload.

Associations to other use cases

- None

Alternative Flow

- If request pools need to be assigned to a different Scheduler, the Supervisor shall have capability to remove a Scheduler from a request pool before assigning the pool to another Scheduler.

1.2.16 Assign Time Blocks for Scheduling

Actor
Administrator or designee

Purpose and Objectives
Each clinic and each Care Provider will have blocks of time available in the system to which schedulers will be able to assign appointments. These blocks of time may vary from day to day in number and length, based on facilities, equipment, and staff available. Certain time blocks may be assigned for routine appointments, annual check-ups, etc. versus other types of care, though the care provider may be the same. Since care providers also require time for internal meetings, preparing reports, and walk-in visits, the time blocks do not directly correspond to the shift plans.

It is anticipated that the time blocks made available for scheduling will include all equipment, staff and other resources needed to complete the type of appointment that can be scheduled to

the time block. As an example, it is assumed that for dental routine appointments the dentist, assistant, chair, and x-ray machine will all be available during the assigned time block. Administrators will be staff who are familiar with the local settings of a clinic and understand constraints of local facilities and rooms. Administrators own the calendar of an institution, clinic, or specific care provider.

This use case assists the Administrator to assign blocks of time in the scheduling system that will be made available to Schedulers for scheduling appointments.

Trigger Events

- None

Precondition

- Treatment rooms and facilities have been downloaded to the system (most likely from BIS).

Post condition

- Blocks of time for scheduling have been identified and are available to HCSS schedulers.

Use Case Flow

1. The Administrator brings up the “Create Available Blocks of Time” screen and system shall display a list of treatment locations the Administrator is responsible for (e.g. medical clinic rooms, dental chairs, therapy rooms, etc.)
2. The Administrator selects a treatment location from the list and the system shall display the treatment location’s schedule.
3. The Administrator will then assign time blocks available for scheduling appointments:
    a. The Administrator shall indicate what type of appointments (e.g. routine exam, specialty care, telemedicine etc.) can be scheduled.
    b. The Administrator shall have the option to indicate maximum capacity (e.g. 10 patients per classroom).
    c. The Administrator shall have the option to enter the length of an individual encounter (e.g. 20 minutes).
4. The system shall make the assigned blocks of time available to Schedulers.

Associations to other use cases

- None

Alternative Flow

- None

1.3 Mental Health Care Actors and Use Cases

This section contains the use cases developed in workshops with Mental Health Subject Matter Experts. Table 2 provides an overview of the actors and use cases for the HCSS mental health functionality.

Table 2. Overview of Mental Health Actors and Use Cases

Actor	Use Case
Bus Screen Nurse	Record Bus Screen Encounter
Scheduler	Schedule Initial Mental Health Screen
Registered Nurse	Record Initial Mental Health Screen Encounter
Requestor	Request to Schedule an Appointment
Scheduler	Schedule Mental Health Appointment
Mental Health Clinician	Record Mental Health Psychological Evaluation
Mental Health Case Manager	Transfer Offender (sending institution)
R&R Nurse	Record Transfer (receiving R&R)
Mental Health Case Manager	Transfer Offender (receiving institution)
Assigner	Assign Mental Health Case Manager
Mental Health Care Provider (Social Worker, Psychologist, Psychiatrist)	Record Mental Health Intake Evaluation
Mental Health Case Manager	Request to Schedule Mental Health IDTT Meeting
Scheduler	Schedule Mental Health IDTT Meeting
Mental Health Case Manager	Record Mental Health IDTT Meeting
Screening Nurse	Record CDCR Health Care Services Request Form #7362
Mental Health Nurse	Record Sick Call Referral Request & Triage
Mental Health Case Manager	Record Mental Health Case Manager Encounter
Scheduler	Resolve Scheduling Conflicts
Scheduler	Reschedule Mental Health Appointment
Mental Health Clinician-on-call	Record Mental Health TTA Encounter
Scheduler	Schedule DMH Transfer
Clinician	Record Clinical Rounds Encounter
Administrator	Assign Time Blocks for Scheduling
Supervisor	Assign Scheduler

1.3.1 Record Bus Screen

Actor
Bus Screening Nurse

Purpose and Objectives
Bus screens are required any time offenders enter a prison after having been absent from that institution longer than 24 hours. However, the first encounter between an offender and CDCR health care providers occurs when offenders step off of the transport bus at the Reception Center (RC). The Strategic Offender Management System (SOMS) is notified in advance of which offenders will be arriving and the approximate time. Through Integration with SOMS, the Health Care Scheduling System (HCSS) is notified and schedules a “Bus Screen” appointment for each offender arrival. It is assumed that at the event of an offender arrival, a calendar entry is made in HCSS for each arriving offender to the Reception Center and that calendar entry can be sorted by Reception Center so that the Bus Screening nurse can get a view of all offenders who are planned to arrive at the RC. Occasionally an offender will arrive without prior custody notification (e.g., parole violators or county jail add-ons). In such cases, the offender is added to custody’s arrival list as soon as possible.

As offenders leave the transport bus, custody officers check the offender into SOMS and a registered nurse conducts the Bus Screen on CDCR Form #7277 (includes medical, mental health, and dental information). The nurse records this information in a separate system from HCSS. If the nurse determines an offender meets the criteria for further Health Care attention, the nurse selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., (e.g., Mental Health Psychological Evaluation).

Offenders that do not arrive on the bus are recorded at the end of the day as a “no-show” for their Bus Screen appointment, and a reason code is entered. Offenders who begin the Bus Screen but are unable to complete the appointment are recorded as “incomplete” or “missed.” This can be for a variety of reasons including custody related activities and any type of health related emergency occurring before the Bus Screen is complete. The Bus Screen is an appointment required to be completed before offenders are moved out of temporary reception housing, making it very important to track that it has taken place and every offender has received proper health care attention within the timeframe set in CDCR policies and procedures.

Offenders may also be required to go through an Initial Mental Health Screen and Clark Screen to provide institutions with the information needed to ensure offender accommodations are appropriate (e.g., needs a lower bunk, or has a disability requiring special care). It is envisioned that the HCSS will automatically generate a request for the “Initial Mental Health Screen” and “Clark Screen” appointments when HCSS is notified by SOMS of an incoming transport from the county jail. Note, the Mental Health Psychological Evaluation does not take the place of the Initial Mental Health Screen.

The system must be able to create reports on prisoners who arrived and completed the screening as well as an exception reports on offenders who arrived at the RC and did not complete the screen.

This use case assists the Bus Screen Nurse to record the Bus Screen.

Trigger Events

- An offender arrives at an institution on the bus from county jail.

Precondition

- HCSS has been notified of offender arrival and the Mental Health Bus Screen has been scheduled.

Post condition

- The bus screen and CDCR Form #7277 have been completed and the offender disposition is recorded in HCSS.

Use Case Flow

7. The Bus Screen Nurse logs into the system, brings up the offender and records the fact that the encounter took place. If the record does not exist, see alternative flow.
8. The Bus Screen Nurse records the offender disposition in the system:
    a. Medical disposition
    b. Dental disposition
    c. Mental Health disposition:
        i. There is a crisis and the patient needs immediate Mental Health care (e.g. TTA, CTC, MHCB).
        ii. Criteria are met that require a referral to CDCR Mental Health.
        iii. Criteria are not met requiring a referral to CDCR Mental Health.
9. If Mental Health criteria are met requiring a referral, the Bus Screen Nurse will create a referral for a Mental Health Psychological Evaluation in the system by selecting the “Refer for Mental Health Psychological Evaluation” option.
    a. The system shall route an appointment request to the Scheduler for a Mental Health Psychological Evaluation.
10. Upon completion of the Mental Health disposition, the system shall verify the existence of requests or scheduled appointments for the “Initial Mental Health Screen” and “Clark Screen.”
    a. If none exists, the system shall route an appointment request to a Scheduler (or a group of schedulers) for the Initial Mental Health Screen and/or Clark Screen.

Associations to other use cases

- None

Alternative Flow

- If an offender record does not exist at time of arrival the Bus Screen Nurse will access SOMS and search SOMS for the offender record and download it into HCSS without manual entry.
- If an offender record does not exist at time of arrival, and is not in SOMS, the system shall prompt the Bus Screen Nurse to notify custody.
  - The system will route the notification to custody through SOMS.

1.3.2 Schedule Initial Mental Health Screen

Actor
Scheduler

Purpose and Objectives
After the Bus Screen, all offenders are required to have an "Initial Mental Health Screen" and "Clark Screen." The HCSS automatically generates an appointment request for the Screens once the prisoner transport is confirmed through an interface with SOMS. The Initial Mental Health Screen and Clark Screen must be completed within the timeframe prescribed in the policies and procedures, which may differ by an offender's level of care (CCCMS, EOP, etc.) This use case will discuss the process for only the Initial Mental Health screen, as the schedule processes are similar.

In the HCSS, the Scheduler can view all Initial Mental Health Screen requests listed in a queue. The queue may be sorted or searched by any of the request fields (e.g., Offender Name or Due Date, etc.). It is envisioned that the scheduler will schedule an appointment one or two days prior to the appointment occurring to allow custody to make adequate preparations. HCSS will have the capability to warn the Scheduler of any situation where there is a risk of missing mandated deadlines and ensure that these appointments receive the highest priority.

When the Scheduler selects a request, the system displays the designated specialist (screeners) who can perform the Initial Mental Health Screen as well as associated blocks of time when they are available. The system will allow the Scheduler to select one offender or a group of offenders and schedule the Initial Mental Health Screen without interaction with the screener. It is assumed that HCSS can highlights appointment times where the offender and care provider are both available, taking into account the type of appointment, level of security required, and time for transport.

The Scheduler selects an appointment time and schedules the Initial Mental Health Screen on the provider's calendar. Once an appointment is scheduled, the interface between HCSS, SOMS, and CDR allows the care provider to access offender and appointment information through the system. The provider and custody are notified of the new appointment to enable each to prepare (e.g., creating ducat lists and readying needed equipment).

This use case assists the Scheduler to schedule the Initial Mental Health Screen for an offender.

Trigger Events

- Request for an Initial Mental Health Screen appointment received by Scheduler.

Precondition

- The Bus Screen has been recorded.
- A request for an Initial Mental Health Screen has been generated in the system by the Bus Screen Nurse.

Post condition

- Initial Mental Health Screen is scheduled

Use Case Flow

1. The Scheduler brings up the "Schedule Initial Mental Health Screen" screen and the system shall display a queue of referrals to be scheduled.
    a. The system shall allow to sort the queue by due date of the Initial Mental Health Screen.
2. The Scheduler selects a request from the list and the system shall display a list of available care providers to conduct the Initial Mental Health Screen.
3. The Scheduler selects a care provider and the system shall display the possible appointment times based on the offender calendar and availability of the care provider.
    a. The system shall indicate if an appointment is in conflict with mandated timelines.
    b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will then schedule the appointment.
5. The system shall schedule the appointment on the care provider and offender calendars.
6. The system shall notify custody of the scheduled appointment (generate a ducat list) and the care provider.
    a. The system shall notify appropriate personnel if the offender requires special accommodations, e.g., interpreter, wheel chair.

Associations to other use cases

- None

Alternative Flow

- A scheduler may contact the care provider and negotiate a time not on the schedule.
    - The system should not restrict scheduling to times only shown as available.
    - The system needs to notify custody and others involved about potential conflicts.

1.3.3 Record Initial Mental Health Screen

Actor
Mental Health Care Provider & Staff

Purpose and Objectives

All offenders have a request for an "Initial Mental Health Screen" appointment automatically generated by HCSS at the time of arriving at the RC. Once the Initial Mental Health Screen has been scheduled, the appointment occurs. All offenders are required to undergo the Initial Mental Health Screen and other developmental screens to provide institutions with the information needed to ensure offenders are accommodated appropriately and receive necessary care (e.g., needs a lower bunk, or developmental disabilities require special care). Information from the Initial Mental Health Screen is used to generate CHRONO records that inform custody of limited mental health information that is material to their interactions with the offender. These CHRONOs are updated on a regular basis. The CHRONOs are stored and maintained in SOMS.

Offenders do not always arrive at their appointments. Offenders that do not arrive at the Initial Mental health Screen are recorded in HCSS as a "no-show" and a reason code is entered. Custody is notified of each "no-show". Offenders do not show up for appointments for a number of reasons, such as appointment conflicts, transfers, or offender refusal. If the Offender does arrive, the Initial Mental Health Screen is conducted by the care provider at a later time. The care provider records the offender's attendance and disposition. If the care provider determines an offender meets the criteria for further mental health care attention, the provider selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., Mental Health Psychological Evaluation). If the criteria for further mental health care attention are not met, the provider does not initiate an appointment request.

This use case assists the Mental Health Care Provider to record the Initial Mental Health Screen.

Trigger Events
- Offender shows up for the Initial Mental Health Screen appointment
- Appointment time has come and offender does not show up, see alternate flow

Precondition
- The Initial Mental Health Screen has been scheduled.

Post condition
- Initial Mental Health Screening has been conducted and disposition is recorded in the system.
- A request for appointment is generated if further attention is needed.

Use Case Flow

1. The Mental Health Care Provider conducts the encounter and completes all required documentation outside the system.
2. The Mental Health Care Provider will log into the HCSS and bring up the appointment to record the encounter in the system:
    a. Show/no-show
    b. Duration of the encounter
3. The Mental Health Care Provider records disposition:
    a. There is a crisis and the offender needs immediate Mental Health care (e.g. TTA, CTC, MHCB).
    b. The offender does not meet the criteria for a Mental Health Psychological Evaluation referral.
    c. The offender does meet the criteria for a Mental Health Psychological Evaluation referral (e.g., EOP history).
4. If the criteria are met, the Mental Health Care Provider will generate an appointment request in the system for a Mental Health Psychological Evaluation.
    a. The system shall route an appointment request to the Scheduler for a Mental Health Psychological Evaluation.

Associations to other use cases

- None

Alternative Flows

- If the offender does not show up for the appointment, the system shall prompt the Mental Health Care Provider to enter the reason for no-show (drop down with approx. 12 reasons).
    - The system shall then notify custody of no-shows.
    - The system shall prompt the Nurse to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.
- Clark Screen
    - If a Clark Screen is to be recorded, the Mental Health Care Provider will enter the disposition:
        - The Clark Screen is negative—record info on the Chrono and take no further action.
        - The Clark Screen is positive—further evaluation is required.
            - A request for appointment will be entered into HCSS.

1.3.4 Request to Schedule an Appointment

Actor

Requestor

Purpose and Objectives

The Requestor will log into HCSS and request an appointment to be scheduled when circumstances require it. The Requestor will select an offender and the system will suggest required attendees based on care providers currently assigned to the offender and offender location. The Requestor is free to select from the suggested attendees, or search for other care providers to invite. The Requestor may also select care providers as optional attendees to allow the Scheduler greater flexibility in scheduling (it is harder to set an appointment time when there are many required attendees). After selecting the attendee(s), the Requestor will enter a preferred range of times for the appointment to be held (the system shall alert the Requestor if the preferred times are outside of those in the policies and procedures). The appointment request will be routed to the Scheduler to set up the meeting.

This use case assists the Requestor with requesting an appointment.

Trigger Events

- The Requestor determines circumstances warrant an appointment.

Precondition

- Circumstances require an appointment.

Post condition

- An appointment has been requested.

Use Case Flow

1. The Requestor logs into HCSS and brings up the “Appointment Request” screen.
2. The system shall display and allow offender records to be sorted and searched, allowing the Requestor to select the offender for whom the appointment is needed.
3. The Requestor shall indicate the type of appointment needed.
4. The system shall then suggest provider(s) based on assigned clinicians, offender location, etc., and allow the Requestor to select required and optional attendees (e.g. offender peer education programs, care management, telemedicine, etc.)
    a. The system shall allow for the invitation of additional attendees.
5. The system shall prompt the Requestor for a preferred range of appointment dates within mandated timeframes.
6. The system shall generate the appointment requests and route it to the Scheduler.

Associations to other use cases

- Predecessor to "Schedule Appointment" and any use cases where the system prompts an HCSS user to request a follow-up or other type of appointment.

Alternative Flow

- None

1.3.5 Schedule Mental Health Appointment

Actor
Scheduler

Purpose and Objectives
A Mental Health appointment can be scheduled for any type of Mental Health care (e.g., Case Manager visit, Psychiatry, group therapy, educational class, etc.). A request is created in HCSS and assigned a specific due date based upon policies and procedures. A request may include a single appointment or a series of appointment (e.g. 10 structured therapy sessions). The request is routed to a scheduler whose role is to appointments to minimize conflicts and be completed within policy-specified limits.

The Scheduler logs into HCSS and selects the "Schedule Appointment" queue, and then selects and views the request. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). If a Care Provider is not specified, the Scheduler may "select all" providers and view all provider availability for the appointment by time slot. The system shall then display the available appointment times. If a specific Care Provider and time are requested, the Scheduler may manually contact the parties involved if the current schedules conflict with the request. The Scheduler will select an appointment time and schedule the appointment. A notification of the new appointment will be sent by the system to the offender Case Manager (if existing), the Care Provider scheduled, and to custody.

This use case assists the Scheduler with scheduling a Mental Health Appointment.

Trigger Events
- Request received in Scheduler's inbox

Precondition
- Request has been generated by a Requestor

Post condition
- Appointment is scheduled

Use Case Flow

1. The Scheduler brings up the “Schedule Appointments” screen and the system shall display a queue of appointment requests to be scheduled.
    a. The system shall allow the Scheduler to search or sort the request queue by any field (date, offender, Case Manager, required participants, etc.).
2. The Scheduler selects a request from the queue and the system shall display a list of available care providers to conduct the appointment, report a requested provider if any, and suggest some providers based on offender information (e.g. housing unit, current level of care, assigned providers, previous providers etc.).
3. The Scheduler selects a care provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
    a. The system shall indicate if a suggested appointment is in conflict with mandated timelines.
    b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will schedule the appointment.
5. The system shall schedule the appointment on the Care Provider and offender calendars.
6. The system shall notify custody of the scheduled appointment (generate a ducat list).
    a. The system shall notify appropriate personnel if the offender requires special accommodations.

Associations to other use cases

- None

Alternative Flow

- If a facilitator becomes unavailable to lead a scheduled group session, the system shall allow and suggest a qualified substitute as an alternative to event cancellation.

1.3.6 Record Mental Health Psychological Evaluation

Actor
Mental Health Clinician

Purpose and Objectives
At any point when a new offender is screened for reception into the CDCR system, a Mental Health Care provider may request the offender undergo a Mental Health Psychological Evaluation to determine if the offender should be included in the CDCR Mental Health system of care. Some offenders may be referred directly from the Bus Screening, while others may have a request generated in the system at the completion of the Initial Mental Health Screen. Once the evaluation has been requested and scheduled, a Mental Health Clinician conducts the evaluation.

Once the Mental Health Evaluation has occurred, the Clinician will log into HCSS and record offender attendance, duration of the encounter, and offender disposition. The system will prompt and allow a new request for appointment or request for an IDTT meeting to be generated by the Clinician and routed to the scheduler.

This use case assists the Mental Health Clinician to record the Mental Health Psychological Evaluation.

Trigger Events

- The Mental Health Evaluation is due.
- Appointment time has come and offender does not show up, see alternate flow.

Precondition

- Mental Health Psychological Evaluation appointment is scheduled with the Clinician.
- Clinician has access to all scheduled appointments incl. reason for appointment.

Post condition

- Mental Health Psychological Evaluation has been conducted and the disposition is recorded in the system.

Use Case Flow

1. The Clinician conducts the encounter and completes all required documentation outside of the HCSS.
2. The Clinician will log into HCSS and bring up the appointment to record the encounter in the system:
    a. Show/no-show
    b. Duration of encounter
3. The system shall prompt The Care Provider to indicate:
    a. If a request for an IDTT appointment should be generated
    b. If any other appointment is necessary
4. The system shall route any generated requests to the assigned Scheduler.

Associations to other use cases

- Potential successor to the Initial Mental Health Screening.

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Clinician to enter the reason for no-show (drop down with approx. 12 reasons).

- ❑ The system shall then notify custody of no-shows.
- ❑ The system shall prompt the Clinician to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.3.7 Transfer Offender (sending institution)

Actor
Mental Health Case Manager

Purpose and Objectives
Offender transfers between CDCR institutions provide a significant challenge to the continuity of quality offender health care. Within a single institution, care providers are able to navigate the dynamic environment of scheduling offenders across three health disciplines and a custody system by often relying on established relationships and communications that are fostered by close proximity. Those relationships and communications do not often extend between institutions that may be more than 500 miles apart. HCSS provides an opportunity to effectively communicate information about an offender's pre-transfer schedule to a receiving institution, while allowing resources to be efficiently re-tasked by the sending institution.

Offenders sometimes transfer with little advance notice, or with a great deal of notice and postponements. Because of this variability, care providers must continue scheduling appointments, meetings, and treatment until the offender is actually transferred. When an offender is expected to transfer, HCSS will be notified through its interface with SOMS. HCSS will alert the Case Manager to prepare for the actual transfer, or alternately request a hold for mental health reasons (e.g. Keyhea Hearing). When the actual transfer occurs, the Case Manager will log into HCSS and select the offender. The system will display all pending and scheduled appointments and the Case Manager will select to suspend them and enter a reason code (transfer). The system will record the name, date, and time of the person who suspended the appointments. The system will route notifications to all clinical staff assigned to the offender about the suspension and transfer, to allow for an efficient reallocation of appointments to other offenders in need. Information on previously scheduled and suspended appointments will be made available to the receiving institution.

This use case assists the Mental Health Case Manager to record an offender transfer.

Trigger Events
- Time of offender transfer has arrived

Precondition
- Offender pending transfer has been recorded in SOMS
- The Case Manager has been notified of pending transfers (inbox shows cases of pending transfers)
- Case Manager has access to all scheduled appointments incl. reason for appointment

Post condition

- Pending appointments with sending institutions have been suspended and receiving institution is notified to re-schedule pending appointments

Use Case Flow

1. The Case Manager logs into HCSS and brings up the queue with offenders to be transferred.
2. The Case Manager selects an offender from the list.
3. The system shall display all pending requests and scheduled appointments.
4. The system shall display the option to suspend all pending and scheduled appointments.
    a. The system shall allow the entry of a reason code.
    b. The system shall track the date, time, and name of the person who suspended the appointments.
5. The system shall notify all clinical staff assigned to the offender about the suspensions and transfer.

Note: It is assumed that when the offender is assigned to the receiving institution case manager, the case manager can view a complete appointment history including status (e.g. suspended appointments as a result of transfer). It is the assumption that the receiving case manager is responsible for determining next actions.

Associations to other use cases

- None

Alternative Flow

- The Case Manager may request a hold for mental health reason (e.g. Keyhea Hearing)

1.3.8 Record Transfer (receiving R&R)

Actor
R&R Nurse

Purpose and Objectives
SOMS will notify HCSS of the pending and actual transfer of an offender. The offender will arrive at the receiving institution's R&R, where the R&R Nurse will screen the offender for health care related issues and needs. After the screening, it is envisioned that the R&R Nurse will log into HCSS to record the arrival and encounter related to the completed transfer, followed by the Nurse requesting any further evaluation deemed necessary. The system will record the Nurse's name and the date and time of arrival. It is envisioned that the system will automatically generate requests for a Mental Health Case Manager assignment and a Mental Health Intake Evaluation upon the arrival of a known Mental Health offender/patient. The system will route

these requests, and any further encounters requested by the R &R Nurse, to the appropriate schedulers.

This use case assists the R&R Nurse to record offender transfer at the receiving institution.

Trigger Events

- The Offender arrives at the receiving institution.

Precondition

- The prison to prison Offender transfer has been recorded in SOMS.
- The Offender has been transferred.

Post condition

- The Offender has been received, housed, and requests for an Intake Evaluation and Case Manager Assignment have been generated.

Use Case Flow

1. The R&R nurse brings up the queue of offenders being received.
2. The R&R nurse selects an offender from the list and marks that the offender has arrived and the disposition.
3. The System shall prompt the R&R nurse to indicate where custody has assigned housing for the new offender.
4. The system shall:
    a. generate a request for a Mental Health Intake Evaluation
    b. generate a request for to assign a Mental Health Case Manager
    c. Notify the Scheduler.

Associations to other use cases

- Successor to Record Transfer (sending institution)
- Predecessor to Assign Mental Health Case Manager and to Record Transfer (receiving institution)

Alternative Flow

- None

1.3.9 Transfer Offender (receiving institution)

Actor

Mental Health Case Manager

Purpose and Objectives
Offenders are frequently received from other institutions with very little accompanying health information. This lack of information results in the receiving institution having to schedule and perform screenings and evaluations as if the offender were new to the CDCR system so that quality health care is assured. In reality, the same tests may have been performed a few days previously at the sending institution. HCSS records all scheduled and pending appointments and clinical encounters, creating a window into the past for receiving institutions to be able to verify that necessary encounters have taken place and when. This HCSS log of offender activity is envisioned to be accessible by receiving Case Managers to determine next steps once the offender has transferred.

HCSS will be notified by SOMS when an offender is expected to arrive at a receiving institution. A Case Manager will be assigned and will monitor when the offender has arrived. When the transfer is complete the assigned Case Manager will log into HCSS, select the offender, and review the pre-transfer pending and cancelled appointments. The Case Manager will be responsible for deciding which, if any of the appointments, should be requested at the new institution. The system will allow the Case Manager to select appointments to request, and will route the appointment requests to the appropriate scheduler.

This use case assists the Mental Health Case Manager to request scheduling of pre-transfer pending or cancelled appointments at the receiving institution.

Trigger Events
- Offender arrives at receiving institution.

Precondition
- Offender transfer has been recorded in SOMS.
- Scheduled and pending appointments at the sending institution have been cancelled.

Post condition
- Scheduler at receiving institutions has requested pre-transfer scheduled and pending appointments be scheduled.

Use Case Flow

1. The Case Manager logs into HCSS and brings up the queue with newly arrived offenders from other institutions.
2. The Case Manager selects an offender from the list.
3. The Case Manager will review the pending and cancelled appointments from the sending institution.
4. The system shall allow the Case Manager to select a previously scheduled or pending appointment from the sending institution in order to generate a new request at the receiving institution.
5. The system shall route any generated requests to the assigned Scheduler.

Associations to other use cases

- None

Alternative Flow

- If returning from a Mental Health Crisis Bed (MHCB), the system shall allow the scheduling of 5-days of follow-ups (first follow-up within 24 hours, then daily).

1.3.10 Assign Mental Health Case Manager

Actor
Assigner

Purpose and Objectives
Mental Health patient/offenders are each assigned a Case Manager to monitor offender treatment and progress. It is envisioned that HCSS will automatically notify a Case Manager of many events that are scheduled and/or recorded within the system (e.g., missed or cancelled appointments regardless of health care discipline, upcoming appointments requiring a request be entered in the system, etc.). In many institutions, Mental Health Evaluations are completed by clinicians who are not the assigned Case Manager. When clinical staff decide that an offender needs the care of CDCR Mental Health, the clinician completing offender intake will request a Case Manager assignment in the system. The request is routed to a designated Assigner to assign a Case Manager.

The Assigner will log into HCSS and select the Case Manager Assignment queue to view all requests for offenders to receive assignment. Upon selecting a request, the system will display all qualified providers, but highlighting those with excess caseload availability for new offenders to be added. The system will also suggested Case Managers based on business rules and any preferences noted in the request, but the Assigner will be able to select any Case Manager regardless of caseload size, system business rules, or preferences. If selecting a Case Manager without caseload availability, it is assumed the Assigner will be able to contact Case Managers manually outside of the system to discuss the assignment. After the Assigner assigns a Case Manager, the system will notify the assigned Case Manager and route a Case Manager appointment request to the scheduler.

This use case assists the Assigner with assigning a Case Manager.

Trigger Events

- Request for assignment of a Case Manager received

Precondition

- Mental Health Psychological Evaluation completed
- Offender included in CDCR Mental Health System

Post condition

- Case Manager assigned, notified, and appointment requested.

Use Case Flow

1. The Assigner logs into HCSS and brings up a list of requests in the "Case Manager Assignment" queue.
2. The Assigner selects a request from the list and the system shall display available Case Managers.
    a. The system shall suggest a Case Manager based on business rules and requestor preference (e.g. rotation, locations, specialty, availability, etc.)
    b. The system shall allow the Assigner to search all available Case Managers based upon other selected criteria (location, specialty, disability accommodations, etc.)
3. The Assigner selects the Case Manager to be assigned and the system shall generate an appointment request for the offender to see the Case Manager within mandated timeframes.
    a. The system shall assign the Case Manager to the offender in HCSS.
    b. The system shall notify the Case Manager of the assignment.
4. The system shall route the Case Manager appointment request to the Scheduler to be scheduled.

Associations to other use cases

- None

Alternative Flow

- None

1.3.11 Record Mental Health Intake Evaluation

Actor
Mental Health Care Provider or designee (Social Worker, Psychologist, Psychiatrist, Recreational Therapist)

Purpose and Objectives
Offenders newly placed in CCCMS or EOP levels of care undergo an intake evaluation conducted by a Mental Health Care Provider. The information gathered in the evaluation is used to help determine appropriate treatment and level of care options for the offender.

Once a the intake evaluation has occurred, the Care Provider is envisioned to log into HCSS and record offender attendance, duration of the encounter, and offender disposition. The system

will prompt and allow a new request for appointment or request for an IDTT meeting to be generated and routed to the scheduler.

This use case assists the Mental Health Care Provider to record the Mental Health Intake Evaluation.

Trigger Events

- The Mental Health Intake Evaluation is due
- Appointment time has come and offender does not show up, see alternate flow

Precondition

- The Mental Health Intake Evaluation has been scheduled

Post condition

- Initial Screening has been conducted and disposition is recorded in the system.

Use Case Flow

1. The Care Provider conducts the encounter and completes all required documentation outside of HCSS.
2. The Care Provider or designee will log into HCSS and bring up the appointment to record the encounter in the system:
    a. Show/no-show
    b. Duration of encounter
3. The system shall prompt The Care Provider to indicate if a request for an IDTT appointment is required.
4. The system shall route any generated requests to the assigned Scheduler.

Associations to other use cases

- Predecessor to a Mental Health IDTT meeting.

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Care Provider or designee to enter the reason for no-show (drop down with approx. 12 reasons).
    - The system shall then notify custody of no-shows.
    - The system shall prompt the Care Provider to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.3.12 Request to Schedule Mental Health IDTT Meeting

Actor

Case Manager or designee

Purpose and Objectives

Interdisciplinary Treatment Team (IDTT) meetings are used in the Mental Health setting to ensure offender/patients receive the best possible care. The required attendees of an IDTT are the offender, assigned Case Manager, assigned Psychiatrist, and Correctional Counselor-1 (CC1). Other care providers are invited to attend IDTT meetings depending on offender treatment needs. Some custody-based offender designations can limit what is included in a Mental Health Treatment Plan (e.g. group therapy, education, etc.), therefore interaction between Mental Health Providers and Custody Officers is important to maintain.

Case Managers are responsible for scheduling IDTT meetings for their caseload offenders. OTs often help with the process. Some institutions have organized their schedules to do numerous IDTTs in one large block of time on the same day(s) each week. Case Managers, however, are still responsible for scheduling and running those meetings. Outside of required IDTT meetings based on policies and procedures, the regularity of offender IDTTs is determined by each offender's Mental Health Treatment Plan, the offender's level of care, and other clinical observations of offender mental health.

When a periodic IDTT is due, or circumstances require one, the Case Manager or designee will log into HCSS and request an IDTT appointment to be scheduled. The Case Manager will select an offender from their case load and the system will suggest required attendees based on clinicians currently assigned to the offender and offender location. The Case Manager is free to select from the suggested attendees, or search for other care providers to invite. The Case Manager may also select care providers as optional attendees to allow the Scheduler greater flexibility in scheduling (it is harder to set an appointment time when there are many required attendees). After selecting attendees, the Case Manager will enter a preferred range of times for the IDTT to be held (the system shall alert the Case Manager if the preferred times are outside of those in the policies and procedures). The appointment request will be routed to the Scheduler to set up the meeting.

This use case assists the Clinical Case Manager or designee with scheduling a Mental Health IDTT meeting.

Trigger Events

- Periodic IDTT is due
- The Case Manager determines special circumstances warrant an IDTT.

Precondition

- A Periodic IDTT is due, or special circumstances require an IDTT.

Post condition

- An IDTT has been requested.

Use Case Flow

1. The Case Manager or designee logs into HCSS and brings up the "IDTT Appointment Request" screen.
2. The system shall display the Case Manager's case load and allow the Case Manager to select the offender for whom the IDTT is requested.
3. The system shall suggest attendees based on assigned clinicians, offender location, etc., and allow the Case Manager to select required and optional attendees.
    a. The system shall allow for the invitation of additional attendees.
4. The system shall prompt the Case Manager for a preferred range of appointment dates within mandated timeframes.
5. The system shall generate the appointment request and route it to the Scheduler.

Associations to other use cases

- Predecessor to "Schedule Mental Health IDTT Meeting."

Alternative Flow

- None

1.3.13 Schedule Mental Health IDTT Meeting

Actor
Scheduler

Purpose and Objectives
A Mental Health IDTT meeting is scheduled after a request is entered into HCSS (usually entered by an offender's case manager). The request is routed to the Scheduler's "Schedule IDTT" queue. The Scheduler selects the request from the queue and the system displays the required and optional attendees that the Requestor had selected. The system takes the IDTT request due date into account and will suggest meeting times when all attendees are available, or at the minimum all required attendees. To find a meeting time when attendees are available, the Scheduler may have to manually contact custody or the care providers involved to create a suitable meeting time within the required time constraints.

Once a meeting time is found, the Scheduler will select it and the system will schedule the IDTT on all participants' calendars. An invitation will be sent to all requested and scheduled attendees regardless of calendar availability, as some may choose to alter their own calendar availability to attend the IDTT meeting. The system will notify custody of the scheduled appointment.

This use case assists the Scheduler with scheduling an IDTT for an offender.

Trigger Events

- An IDTT has been requested

Precondition

- Scheduler is notified of an IDTT request
- IDTT member calendars are up to date

Post condition

- IDTT has been scheduled.

Use Case Flow

1. The Scheduler brings up the "Schedule IDTT" screen and the system shall display a queue of requested IDTTs to be scheduled.
    a. The system shall allow the Scheduler to search or sort the IDTT queue by any request field (date, offender, Case Manager, required participants, etc.).
2. The Scheduler selects a request from the list, and the system shall display both required and optional attendees requested
3. The system shall display a list of possible IDTT times based on the requested date range and calendar availability of attendees (for custody and other non-health care resources, this may not be possible).
    a. The Scheduler may manually contact participants to determine if they are available.
    b. The Scheduler may look up staff availability in BIS.
    c. The Scheduler may contact custody to reschedule existing appointments of the offender.
    d. The Scheduler may contact the Case Manager to modify attendees if required staff are unavailable.
    e. The system shall indicate if an appointment is in conflict with mandated timelines.
    f. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will select an appointment time.
5. The system shall schedule an appointment and send an appointment invitation to all participants.
6. The system shall schedule the appointment on all health care providers' and the offender's calendars.
7. The system shall notify custody of the scheduled appointment (generate a ducat list).

Associations to other use cases

- None

Alternative Flow

- None

1.3.14 Record Mental Health IDTT Meeting

Actor
Mental Health Case Manager or designee

Purpose and Objectives
IDTT meetings are held to establish a Mental Health Treatment Plan for an offender in a group setting with all core offender care and service providers represented. A meeting may also be held to discuss new developments relevant to offender treatment. IDTT meetings produce numerous scheduling outcomes, including educational and group therapy sessions, follow-up Case Manager Appointments, Psychiatric medication reviews, etc. Recording an IDTT offender encounter is very important.

Once an IDTT meeting has occurred, we envision the Case Manager to log into HCSS and record required attendee and offender attendance, the duration of the encounter, and any further scheduling actions to be requested (follow-up with Case Manger, appointments by discipline, specialty care, education or group therapy, etc). The system will allow all new requests for scheduling created by the Case Manager to be generated and routed to the appropriate scheduler(s).

This use case assists the Mental Health Case Manager to record the IDTT meeting.

Trigger Events
- A Mental Health IDTT is due.
- Special circumstances warrant an IDTT.

Precondition
- A Mental Health IDTT appointment is scheduled.
- Case Manager has access to all scheduled appointments incl. reason for appointments.

Post condition
- Mental Health IDTT has been conducted and the disposition is recorded in the system.

Use Case Flow

1. The Case Manager or designee conducts the encounter and completes all required documentation.
2. The Case Manager or designee will bring up the appointment and record the encounter in the system:

   a. Show/no-show for each attendee
   b. Duration of encounter
3. If required attendees are absent, the system shall ask the Case Manager or designee if the request for the IDTT meeting should be regenerated.
4. The Case Manager or designee will generate a request for appointment if the encounter outcomes or established Treatment Plans warrant:
   a. Follow-up visit(s)
   b. Appointment(s) by discipline (e.g., psychiatry, lab, specialty care, etc.)
   c. Group activities/education
5. The system shall route any requests to the Scheduler.

Associations to other use cases

- None

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Case manager to enter the reason for no-show (drop down with approx. 12 reasons).
  - The system shall then notify custody of no-shows.
  - The system shall prompt the Case Manager to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.3.15 Record CDCR Health Care Services Request Form #7362

Actor
Screening Nurse

Purpose and Objectives
Offenders fill out a CDCR Health Care Services Request Form #7362 when they would like to see a care provider. The forms are available at multiple locations throughout an institution. Offenders fill out their name, CDC#, housing unit, date, the type of care sought (Dental, Mental Health, etc.) and the reason they are requesting the visit. Some levels of care allow for verbal requests because of physical restraints or offender disability, but in that situation a request is written on the offender's behalf. All request forms are deposited in a drop box that is required by policies and procedures to be emptied once a day, but is usually checked at least 2 or 3 times daily.

The screening nurse views each request and enters it into HCSS, being sure to fill out each entry including the target discipline (dental, medical, etc.). The system will then route the requests to Medical, Dental, and Mental Health triage personnel who will decide on further

actions. The #7362s will join staff & custody referrals in the queue of "Sick Call Referrals & Requests." The collection and sorting of the requests should be tracked by the system to ensure compliance with policies and procedures.

This use case assists the Screening Nurse to record a CDCR Health Care Services Request Form #7362 in the HCSS.

Trigger Events

- The offender has completed the CDCR Health Care Services Request Form #7362.

Precondition

- None

Post condition

- The Nurse has recorded the #7362 and the Scheduler is notified.

Use Case Flow

1. The Nurse brings up the "Record CDCR Form #7362" screen and searches for the offender who submitted the 7362.
    a. The system shall allow the Nurse to search for the offender by housing unit, name, CDC#, alias, location, etc.
2. The system shall display a list with matching names and the Nurse will select the name of the offender who has filed the #7362.
    a. The system shall display any previously filed requests by the same offender since last being seen by a case manager or clinician.
3. The system shall display a template for the Nurse to enter information from the #7362 form:
    a. Offender recorded date and time of the 7362 submission.
    b. Type of request:
        i. Medical
        ii. Mental Health
        iii. Dental
        iv. Pharmacy
    c. Reason for requesting health care services.
4. The system shall record the date/time and name of the nurse who reviewed and entered the #7362 information.
5. The system shall forward requests to the appropriate health care disciplines (Mental Health, Dental, etc.) to be reviewed.

Associations to other use cases

- This use case is a predecessor to “Record Sick Call Referral Request & Triage.”

Alternative Flow

- If the offender is not a known Mental Health case, the request will be forwarded to the housing Case Manager.
- Offenders may also use kiosks available to them in the housing unit to enter requests for health care themselves. In this case, requests are routed directly to the triage personnel of the respective discipline.

1.3.16 Record Sick Call Referral Request & Triage

Actor
Mental Health Nurse

Purpose and Objectives
A nurse collects all offender requests for service (CDCR Form #7362), enters them into the HCSS, and the system routes the requests to the correct disciplines. The Mental Health Nurse receives these requests in a “Sick Call Referrals & Requests” queue. Also within the queue are other appointment requests and referrals such as: Staff & Custody referrals based on offender observations, verbal self-referrals from offenders entered into the system, requests originally written on napkins or any other means offenders may have to be referred to see a Mental Health Provider.

The Mental Health Nurse is able to sort and search the “Sick Call Referrals & Requests” queue based on any fields (Due Date, CDC#, Offender Name, etc.). A “reason for request” summary appears in the queue display to allow the Mental Health Nurse to survey all requests and triage them into emergent, urgent, and routine categories of needed care. Emergent requests are dealt with first and require immediate emergency attention. Most emergent situations are recognized and dealt with outside of the HCSS appointment request process. If an offender’s emergent mental health needs are not recognized until request triage, the Mental Health Nurse will initiate emergency processes: custody will be notified to locate the offender and escort them to the TTA if possible, the clinician-on-call will be notified, and HCSS will cancel scheduled offender appointments and notify affected clinics. The emergent status of the request will be recorded in HCSS.

If the Mental Health Nurse determines a request to be urgent, the system will immediately note the urgency of the request and route it the scheduler. The requesting offender’s Case Manager will also be notified and the request due date will reflect an urgent need. The urgent status of the request will be recorded in HCSS. The Scheduler will schedule the appointment as soon as possible, and may manually contact care providers to ensure availability within policy and procedure timeframes.

If a request is classified as routine, the system shall route the request to a scheduler. The routine status of the request will be recorded in HCSS. The offender Case Manager will be notified and the appointment request due date will be set within the timeframe set by policies and procedures.

This use case assists the Mental Health Nurse to record and triage a Sick Call Request / Referral that has been received.

Trigger Events

- Sick Call Referral Request or Offender Request for Interview is delivered to the Mental Health Nurse.

Precondition

- Sick Call Referral Request or Offender Request for Interview is delivered to the Mental Health Nurse.

Post condition

- Sick Call Referral Request is date / time stamped and routed to the appropriate Scheduler.

Use Case Flow

1. The Mental Health Nurse opens the queue of "Sick Call Referrals & Requests" and the system shall display requests in the order of the time they were submitted.
2. The system shall allow for the list of requests to be displayed with "Reason for Request" summary information to aid the Nurse's assessment of each request's severity.
3. The Mental Health Nurse will select a request and the system shall display the options of routine, urgent, or emergent for selection.
    a. If emergent, see alternative flow.
    b. If urgent, the system shall allow for the immediate notification of the Offender's Case Manager and Scheduler to schedule an appointment as soon as possible.
    c. If routine, the system shall route the request to the Scheduler and notify the Case Manager, indicating the timeframe within which an appointment must be scheduled.
4. The system shall record the date/time of each request's initial viewing by the Mental Health Nurse and the time of triage.

Associations to other use cases

- Successor to "Record CDCR Health Care Services Request Form #7362."

Alternative Flow

- If a request is deemed emergent:
    - The system shall allow for immediate scheduling of a Mental Health Appointment on the Offender Calendar.

- ❑ The system shall allow for immediate cancellation with reason codes of existing appointments on the offender calendar:
  - Policies and procedures should determine the timeframe of appointments that should be cancelled (e.g., all appointments within the next 3 hours after emergent event, etc.).
  - Canceled appointments will have new requests generated containing the original information and due dates.
- ❑ The system shall allow for the immediate notification of:
  - All parties affected by cancelled appointments
  - The Mental Health Clinician on call
  - Custody officers to escort the offender to the TTA

In an emergent situation, the Mental Health Nurse may notify appropriate parties personally or by phone, without initially using the system. In this case, the Mental Health Nurse will enter the disposition in HCSS after the offender has received care.

1.3.17 Record Mental Health Case Manager Encounter

Actor
Case Manager

Purpose and Objectives
All care provider encounters are important to record for internal tracking of quality assurance, as well as for external reporting of offenders' access to care. Case Manager appointments with an offender occur to monitor Mental Health Treatment Plan progress as well as to discuss offender concerns and requests for care through processes like a CDCR 7362 Request for Services.

Once a Case Manager encounter has occurred, the Case Manager logs into HCSS and records offender attendance, duration of the encounter, and offender disposition. If the Case Manager judges a follow-up or new appointment is required, the system will allow a new request for an appointment to be generated and routed to the scheduler.

This use case assists the Mental Health Case Manager to record encounters/appointments.

Trigger Events
- Case Manager appointment with an offender is due

Precondition
- A Case Manager appointment is scheduled for the offender
- The Case Manager is assigned to the offender

Post condition

- The Case Manager appointment has been conducted and the disposition is recorded in the system.

Use Case Flow

1. The Case Manager conducts the encounter and completes all required documentation outside of HCSS.
2. The Case Manager will log into HCSS and bring up the appointment and record the encounter in the system:
    a. Show/no-show
    b. Duration of encounter
3. The Case Manager will generate a request for appointment if encounter outcomes warrant:
    a. Follow-up visit(s)
    b. Appointment(s) by discipline
4. The system shall notify the Scheduler to schedule further appointments.

Associations to other use cases

- None

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Case manager to enter the reason for no-show (drop down with approx. 12 reasons).
    - The system shall then notify custody of no-shows.
    - The system shall prompt the Case Manager to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.3.18 Resolve Scheduling Conflict

Actor
Scheduler

Purpose and Objectives
Although coordination of scheduling among the various health care disciplines and insight into an offender's will greatly reduce scheduling conflicts from occurring in the first place, conflicts will still happen in the future due to changing offender commitments, constrained availability of certain care providers or because an offender has missed several previously scheduled appointments.

The system shall notify schedulers of these conflicts and allow the routing of these appointment requests to a Scheduler for resolution. While the actual resolution will remain a manual process, including phone calls and possible in-person meetings of a conflict resolution team, the system shall allow the Scheduler to record the steps taken to resolve the conflict in the system.
Upon resolution of the conflict, the Scheduler will schedule the appointment in the system.

This use case assists the Scheduler to enter a conflict resolution in the system and schedule the appointment.

Trigger Events

- None

Precondition

- Health care appointment has previously been scheduled and another, conflicting commitment has appeared on the offender calendar
- A health care appointment cannot be scheduled within mandated timeframe due to other offender commitments

Post condition

- Scheduling conflict has been resolved and health care appointment is scheduled.
- If mandated timeframes have been violated due to a scheduling conflict, a reason is entered in the system.

Use Case Flow

1. The Scheduler brings up the “Scheduling Conflict Resolution” screen and the system shall display a list of appointment that currently have a scheduling conflict.
2. The Scheduler selects an appointment from the list and the system shall display appointment type, care provider requested and due date of appointment.
3. The Scheduler will then do one or several of the following (outside the system):
    a. Contact other care providers if the conflict can be resolved by rescheduling other health care appointments.
    b. Contact custody to see if another offender commitment can be rescheduled.
    c. Contact the requested care provider to see if another appointment time is available.
    d. Forward the conflict to be resolved by an interdisciplinary conflict resolution team.
4. If the scheduling conflict can be resolved, the scheduler will schedule the appointment at a new date and time in the system.
5. If the conflict cannot be resolved, the Scheduler will schedule the appointment at a time after the mandated deadline.
    a. The system shall prompt the Scheduler to indicate the reason for missing the deadline.

   b. The system shall allow the Scheduler to document the steps and measures taken to resolve the conflict in a manner that would have allowed complying with the mandated timeline.

6. The system shall schedule the appointment on the care provider and offender calendars.
7. The system shall notify custody of the scheduled appointment (generate a ducat list) and the care provider.
   a. The system shall notify appropriate personnel if the offender requires special accommodations, e.g., interpreter, wheel chair.

Associations to other use cases

- None

Alternative Flow

- None

1.3.19 Reschedule Mental Health Appointment

Actor
Scheduler

Purpose and Objectives
A Mental Health appointment may need to be rescheduled for a variety of reasons such as, mandatory court hearings, emergencies, appointments of higher priority, institution lockdowns, or other events resulting in an offender “no-show” at a scheduled appointment. When an offender is recorded as a “no-show,” the system will automatically generate a new request for that appointment, maintaining the information and due date of the original request. The request will be identifiable as a reschedule request.

The Scheduler logs into HCSS and selects the “Schedule Appointment” queue, and is able to search and/or sort the queue by any request field (date, offender, Case Manager, required participants, etc.). Appointments needing to be rescheduled will have due dates that are closer to expiration than other requests and may therefore have a higher priority. The Scheduler selects and views the request. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). HCSS will suggest and highlight the provider previously scheduled when rescheduling an appointment. If a care provider is not specified, the Scheduler may “select all” providers and view all provider availability for the appointment by time slot. The system shall then display the available appointment times. If there are no available appointment times due to the shorter scheduling timeframe of rescheduling, the Scheduler may manually contact the parties involved to ensure the appointment is scheduled before the due date. The Scheduler will select an appointment time and schedule the appointment. A notification of the new appointment will be sent by the system to the offender Case Manager (if existing), the Care Provider scheduled, and to custody.

This use case assists the Scheduler to reschedule a Mental Health appointment for an offender.

Trigger Events

- An offender is recorded as a “no show” for an appointment.
- An appointment has been cancelled

Precondition

- An appointment has been scheduled for an offender

Post condition

- A Mental Health appointment is scheduled before the due date.

Use Case Flow

1. The Scheduler logs into HCSS and brings up the “Schedule Appointments” screen and the system shall display a queue of appointment requests to be scheduled.
    a. The system shall allow the Scheduler to search or sort the request queue by any field (date, offender, Case Manager, required participants, etc.).
    b. Appointments needing to be rescheduled will maintain the due date of the original appointment request.
2. The Scheduler selects a request from the queue and the system shall display a list of available care providers and suggest providers based on offender information (e.g., housing unit location, current level of care, assigned providers, etc.).
    a. The system shall highlight the Care Provider previously scheduled for the appointment
3. The Scheduler selects a Care Provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
    a. The system shall indicate if an appointment is in conflict with mandated timelines.
    b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will schedule the appointment.
5. The system shall schedule the appointment on the Care Provider and offender calendars.
6. The system shall notify custody of the scheduled appointment (generate a ducat list).
    a. The system shall notify appropriate personnel if the offender requires special accommodations.

Associations to other use cases

- None

Alternative Flow

- None

1.3.20 Record Mental Health TTA Encounter

Actor
Mental Health Clinician (depending on time, could be Clinician on-duty or on-call) or designee

Purpose and Objectives
It is impossible to schedule emergencies; therefore, encounters between an offender taken to the Triage and Treatment Area (TTA) and the Mental Health Clinician cannot be formally requested or scheduled. The encounters can, however, be recorded after their occurrence in order to inform current treatment and report on offender access to care. Offenders are taken to the TTA for emergency care regardless of discipline. Offenders that arrive for Mental Health reasons are evaluated and treated by the Clinician-on-call, who may decide the offender requires a Mental Health Crisis Bed for best results.

After treating the offender in the TTA, the Mental Health Clinician or designee will log into HCSS and search for the offender's record. After locating and selecting the offender, the system will prompt the Clinician to indicate that an encounter took place and allow the Clinician to indicate if further evaluation is needed. HCSS will also track the date, time, and name of the Clinician who conducted the encounter. The Clinician will be prompted to consider an appointment request if further evaluation is needed. After possibly generating an appointment or Mental Health Crisis Bed request, both Custody and the offender's Case Manager will be notified of the encounter. Any appointments requested will be routed to the appropriate scheduler.

This use case assists the Mental Health Clinician to record the Mental Health TTA Encounter.

Trigger Events
- Offender brought to TTA for emergent treatment

Precondition
- Offender brought to TTA for emergent treatment

Post condition
- Mental Health Psychological Evaluation has been conducted and the disposition is recorded in the system.

Use Case Flow

1. The Clinician or designee conducts the encounter and completes all required documentation (outside the system).
2. The Clinician or designee will log into HCSS and bring up the offender to record the encounter in the system:
    a. Reason for encounter (based on reason codes)

   b. Disposition (based on reason codes)
   c. Duration of encounter
3. The system shall allow the Clinician to generate requests if encounter outcomes warrant:
   a. Follow-up visit(s)
   b. Appointment(s) by discipline
   c. Transfer to Mental Health Crisis Bed (MHCB)
4. The system shall notify:
   a. The Scheduler to schedule further appointments
   b. Custody if no further treatment is necessary
   c. The offender Case Manager, if existing
   d. Mental Health Crisis Bed Administrator, if applicable

Associations to other use cases

- None

Alternative Flow

- None

1.3.21 Schedule DMH Transfer

Actor
Scheduler

Purpose and Objectives
Some offenders are transferred to the California Department of Mental Health (DMH) to receive care. Offenders who have been requested to transfer by a referring Clinician or Case Manager do not always transfer quickly. DMH is often operating at capacity and an opening must be available within the Level of Care required for the offender's treatment. As a result of this backlog, an offender remains at the CDCR institution and continues to receive care until DMH space becomes available. Once space becomes available, the transfer is scheduled.

The Scheduler logs into HCSS and brings up the "Schedule Transfers" queue to display offenders who have requested and await transfer. The scheduler selects the offender and the system will display all pending requests and scheduled appointments for that offender. The scheduler will select the "Transfer" option and choose the day and time to schedule the transfer to DMH. Because of the possibility of the transfer date changing and in order to maintain the necessary Level of Care, the system will display the option to cancel all scheduled appointments after the selected transfer date, but then generate new requests for those appointments containing the original information. This will allow appointments to still be scheduled if the offender transfer is delayed. The Scheduler will enter a reason code for the

cancellation and the Scheduler's name, date, and time of the cancellation will be recorded. The system will notify all offender assigned staff of the pending transfer and scheduled appointment cancellations. The system will also notify SOMS and transportation of the scheduled transfer to allow adequate preparation time.

This use case assists the Scheduler to schedule an offender transfer to DMH.

Trigger Events

- CDCR Mental Health is notified by DMH that an opening is available.

Precondition

- Transfer to DMH requested and approved.
- DMH has an opening for an additional offender/patient.

Post condition

- A DMH transfer is scheduled

Use Case Flow

1. The Scheduler brings up the "Schedule Transfers" screen and the system shall display a queue of Transfer requests to be scheduled.
    a. The system shall allow the Scheduler to search or sort the request queue by any field (date, offender, Case Manager, required participants, etc.).
2. The Scheduler selects a transfer request from the list.
3. The system shall display all pending requests and scheduled appointments.
4. The Scheduler shall select a date and time for transfer.
5. The system shall display the option to cancel all scheduled appointments after the selected transfer date and generate new requests for those appointments containing the original information, including deadlines.
    a. The system shall allow the entry of a reason code for cancellations.
    b. The system shall track the date, time and name of the person who cancelled the appointments.
6. The system shall notify all clinical staff assigned to the offender of the scheduled transfer.
7. The system shall notify custody and transportation of the scheduled transfer.

Note: It is assumed that when the offender is assigned to a DMH case manager that the case manager can view a complete appointment history incl. status (e.g. cancelled appointment as a result of transfer). It is the assumption that the receiving case manager is responsible for determining next actions.

Associations to other use cases

- None

Alternative Flow

- None

1.3.22 Record Clinical Rounds Encounter

Actor
Clinician

Purpose and Objectives
Mental Health providers conduct daily rounds to assess offender health and progress with current treatment. Because of the informal process of meeting with patients, the scheduling of Care Provider rounds is not within the HCSS scope. However, the record of these encounters between Care Providers and offenders is useful for assessing the quality and access to care provided to offenders and should be tracked.

If an offender has been moved into Administrative Segregation, a MH-7 Pre-ASU Mental Health Screen is required to occur. Clinicians tasked with performing this evaluation on short notice may record the encounter and refer the patient-inmate for further evaluation to determine mental health needs.

After completing a series of offender encounters while on rounds, it is envisioned that the Clinician or designee will log into HCSS and display a list of all offenders currently located at the clinic. The Clinician will select all offenders encountered during rounds and select the encounter type “Clinical Rounds”. For each offender, the system will prompt the Clinician to indicate the encounter took place and allow the Clinician to indicate if further evaluation is needed. HCSS will also track the date, time, and name of the Clinician conducting the encounter. The Clinician will be prompted to consider an appointment request if further evaluation is needed. Each offender’s Case Manager will be notified of the encounter and any appointments requested.

This use case assists the Clinician to record encounters with offenders occurring during clinical rounds.

Trigger Events

- Clinician has completed clinical rounds

Precondition

- Clinician is scheduled for clinical rounds

Post condition

- Clinical rounds are recorded in the system.

Use Case Flow

1. The Clinician conducts all offender encounters and completes all required documentation for rounds outside the HCSS.
2. The Clinician logs in to the system and brings up the list of offenders currently located at the clinic.
3. The system shall allow the Clinician to select all offenders visited during rounds and allow the clinician to select the encounter type “clinical rounds.”
4. For each offender, the system shall prompt the Clinician to indicate that the encounter took place.
    a. The system shall record date/time and Name of Clinician who conducted rounds.
5. The system shall allow the Clinician to indicate if further evaluation is required.
    a. If further evaluation needed, the system shall allow the Clinician to request an appointment.
6. The system shall notify the Case Manager of the request.
7. The system shall route the request to the Scheduler.

Associations to other use cases

- None

Alternative Flow

- None

1.3.23 Assign Time Blocks for Scheduling

Actor
Administrator

Purpose and Objectives
Each clinic and each health care provider will have blocks of time available in the system to which schedulers will be able to assign appointments. These blocks of time may vary from day to day in number and length, based on facilities, equipment and staff available. In addition, certain time blocks may be assigned for routine appointments, annual check-ups etc. versus certain types of other care, although the care provider may be the same. Since care providers also require time for internal meetings, preparing reports or walk-in visits, the time blocks do not directly correspond to the shift plans.

It is anticipated that the time blocks made available for scheduling will include all equipment, staff and other resources needed to complete the type of appointment that can be scheduled to this time block. As an example, it is assumed that for dental routine appointments the dentist, assistant, chair and x-ray machine will all be available during the assigned time block.

Administrators will be staff who are familiar with the local settings of a clinic and understand constraints of local facilities and rooms. Administrators own the calendar of an institution, clinic or specific care provider.

This use case assists the Administrator to assign blocks of time in the scheduling system that will be available for scheduling appointments.

Trigger Events

- None

Precondition

- Treatment rooms an facilities have been downloaded from BIS

Post condition

- Blocks of time for scheduling have been identified and are available to HCSS schedulers

Use Case Flow

1. The Administrator brings up the “Create Blocks of Time” screen and system shall display a list of treatment rooms the Administrator is responsible for (e.g. medical clinic rooms, dental clinic rooms, therapy rooms etc.)
2. The Administrator selects a treatment room from the list and the system shall display a schedule of the treatment room.
3. The Administrator will then assign time blocks available for scheduling appointments and indicate what type of appointments (e.g. group therapy, individual counseling etc.) can be scheduled.
    a. The Administrator shall have the option to indicate maximum capacity (e.g. 10 patients per classroom) to a time block.
    b. The Administrator shall have the option to enter the length of an individual encounter (e.g. 20 minutes).
4. The system shall make the assigned blocks of time available to Schedulers.

Associations to other use cases

- None

Alternative Flow

- None

1.3.24 Assign Scheduler

Actor

Supervisor

Purpose and Objectives
Requests for appointments can be generated by various actors, such as the 7362 Triage Nurse, a clinician who requests a follow up appointment, a utilization manager who approves a specialty care appointment etc. The requests will indicate the type of appointment as well as the mandated timeframe in which the appointment must occur. Appointment requests of the same type form a pool of requests that will be scheduled by a Scheduler.
The HCSS shall have the capability to organize the requests by discipline, offender location, time of appointment, urgency, care provider etc. Request pools will be assigned by a Supervisor to schedulers who have the responsibility to schedule the appointments. Schedulers should be able to schedule appointment regardless of their location which will allow for a centralized approach to scheduling for telemedicine and specialty care appointments.

This use case assists the Supervisor to assign a scheduler to a pool of requests to be scheduled.

Trigger Events
- None

Precondition
- Schedulers are in the system, including their location, specialty and other relevant skills (e.g. language)
- Request pools have been defined

Post condition
- A scheduler has been assigned to one or multiple request pools and the Scheduler is notified.

Use Case Flow

1. The Supervisor brings up the “Assign Scheduler” screen and the system shall display a list of all request pools.
2. The Supervisor selects a request pool from the list.
    a. The system shall indicate if this request pool is already assigned to a scheduler.
    b. The system shall display a list of schedulers who have the appropriate authorization and skills to schedule appointments for the selected request pool.
3. The Supervisor will then select a Scheduler from the list and assign him/her to the pool of requests.
    a. The system shall allow the Supervisor to assign one or multiple schedulers to a pool of requests.
    b. The system shall allow the Supervisor to assign a primary and secondary Scheduler to a pool of requests.

4. The system will notify the Scheduler of the assignment and the newly assigned request pool will become part of that Scheduler's workload.

Associations to other use cases

- None

Alternative Flow

- If request pools need to be assigned to a different Scheduler, the Supervisor shall have capability to remove a Scheduler from a request pool before assigning the pool to another Scheduler.

1.4 Dental Actors and Use Cases

This section contains the use cases developed in workshops with Dental Care Subject Matter Experts. Table 2 provides an overview of the actors and use cases for the HCSS dental functionality.

Table 3. Overview of Dental Actors and Use Cases

Actor	Use Case
Bus Screen Nurse	Record Bus Screen
Scheduler	Schedule Dental Screening
Dentist (or designee)	Record Dental Encounter
Dentist (or designee)	Record Dental Screening
Dentist (or designee)	Record Dental Priority Code (DPC)
Dentist (or designee)	Transfer Offender (sending institution)
R&R Nurse	Record Transfer (receiving R&R)
Dentist (or designee)	Transfer Offender (receiving institution)
Triage Nurse	Record CDCR Health Care Services Request Form #7362
Dentist	Request for Service Triage
Requestor	Request to Schedule an Appointment
Scheduler	Schedule Appointment
Scheduler	Reschedule Appointment
Scheduler	Resolve Scheduling Conflict
Care Provider	Record TTA Encounter
Care Provider	Record Clinical Rounds Encounter
Administrator	Assign Scheduler
Administrator	Assign Time Blocks for Scheduling

1.4.1 Record Bus Screen

Actor
Bus Screen Nurse

Purpose and Objectives
The first encounter between an offender and CDCR health care providers occurs when offenders step off of the transport bus at the Reception Center (RC). However, the Strategic Offender Management System (SOMS) is in general notified in advance of which offenders will be arriving and the approximate time. Through integration with SOMS, the Health Care Scheduling System (HCSS) is notified and a “Bus Screen” appointment for each offender arrival is scheduled. It is assumed that at the event of an offender arrival, a calendar entry is made for each arriving offender to the Reception Center. That calendar entry can be sorted by the Reception Center so that the Bus Screening nurse can view all offenders who are planned to arrive at the RC.

As offenders leave the transport bus, custody officers check the offender into SOMS and a nurse conducts the Bus Screen on CDCR Form #7277 (includes medical, mental health, and dental information). The Bus Screen nurse records this information in a separate system from HCSS. If the nurse determines an offender meets the criteria for further health care attention, the nurse selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., PCP examination, Psychological Evaluation, etc.).

Offenders that do not arrive on the bus are recorded at the end of the day as a “no-show” for their Bus Screen appointment, and a reason code is entered. Offenders who begin the Bus Screen but are unable to complete the appointment are recorded as “incomplete” or “missed.” This could be for a variety of reasons including custody related activities or any type of health related emergency occurring before the Bus Screen is complete. The Bus Screen is an appointment required to be completed before offenders are moved out of temporary reception housing, making it very important to track its completion and that every offender has received proper health care attention within the timeframes set in CDCR policies and procedures.

Offenders may also be required to go through various Health Screens (e.g., Medical Physical, Initial Mental Health Screen, etc.) that provide institutions with the information needed to ensure offender accommodations are appropriate (e.g., needs a lower bunk, or developmental disabilities requiring special care). It is envisioned that the HCSS will automatically generate a request for such appointments when HCSS is notified by SOMS of an incoming transport from the county jail.

Note, the system must be able to create reports on prisoners who arrived and completed the screening as well as exception reports on offenders who arrived at the RC and did not complete the screen.

This use case assists the Bus Screen Nurse to record the Bus Screen.

Trigger Events
- An offender arrives at an institution on the bus from county jail.

Precondition

- HCSS has been notified of offender arrival and further required Screenings have been scheduled.

Post condition

- The bus screen and CDCR Form #7277 have been completed and the offender disposition is recorded in HCSS.

Use Case Flow

11. The Bus Screen Nurse logs into the system, brings up the offender and records the fact that the encounter took place. If the record does not exist, see alternative flow.
12. The Bus Screen Nurse records the offender disposition in the system:
    a. Medical disposition:
        i. There is an emergency and the patient needs immediate care (e.g. TTA, CTC, etc.).
        ii. Bus Screen criteria are met requiring an offender referral for further evaluation.
        iii. The offender does not require any further evaluation.
    b. Dental disposition:
        i. There is an emergency and the offender needs immediate care (e.g. TTA).
        ii. Criteria are met requiring an offender referral to the dental clinic, (i.e. the offender responded yes to any of the four diagnostic questions and a dentist visit is required within three days)
    c. Mental Health disposition:
        i. There is a crisis and the patient needs immediate Mental Health care (e.g. TTA, CTC, MHCB).
        ii. Bus Screen criteria are met requiring an offender referral to CDCR Mental Health (e.g., Psychological Evaluation).
        iii. The offender does not meet the criteria for a Mental Health referral.
13. If a referral is required, the Bus Screen Nurse will create a referral for further evaluation in the system by selecting the “Request for Appointment” option.
    a. The Nurse shall specify the type of encounter.
    b. The system shall route an appointment request to the appropriate Scheduler.
14. Upon completion of the offender disposition, the system shall verify the existence of a request or scheduled appointment for the other required Reception Center screenings.
15. If further screenings are required, the system shall route an appointment request to a Scheduler (or a group of schedulers) for the required encounters.

16. The system shall track the completion status of the Bus Screen.

Associations to other use cases

- None

Alternative Flow

- If an offender record does not exist at time of arrival the HCSS system should have an interface to SOMS to allow the nurse to search SOMS for the offender record and down load it into HCSS without manual entry.
  - If a record is not in SOMS, the system shall prompt the Bus Screen Nurse to notify custody.

1.4.2 Schedule Dental Screening

Actor
Scheduler

Purpose and Objectives
After the Bus Screen, all offenders are required to have a Dental Screening. The HCSS automatically generates an appointment request for the Dental Screening once a prisoner transport is confirmed through interface with SOMS. The Dental Screening must be completed within the timeframe prescribed in the policies and procedures. The Dental Screening may consist in a review of the Panorex only or, if the review requires, result in a face-to-face Dental Screening. The dentist conducting the review will indicate in the system whether or not a face-to-face encounter is required. If an encounter is required, an appointment request is created and routed to the scheduler.

In the HCSS, the Scheduler can view all Dental Screening requests listed in a queue. The queue may be sorted or searched by any of the request fields (e.g., Offender Name or Due Date, etc.). It is envisioned that the scheduler will schedule an appointment one or two days prior to the appointment occurring to allow custody to make adequate preparations. HCSS will have the capability to warn the Scheduler of any situation where there is a risk of missing mandated deadlines and ensure that these appointments receive the highest priority.

When the Scheduler selects a request, the system displays the designated specialist (screeners) who can perform the Dental Screening as well as associated blocks of time when they are available. The system will allow the Scheduler to select one offender or a group of offenders and schedule the Dental Screening without interaction with the screener. It is assumed that HCSS can highlight appointment times where the offender and care provider are both available, taking into account the type of appointment, level of security required, and time for transport.

The Scheduler selects an appointment time and schedules the Dental Screening on the provider's calendar. Once an appointment is scheduled, the interface between HCSS, SOMS,

and Clinical Data Repository (CDR) allows the care provider to access offender and appointment information through the system. The provider and custody are notified of the new appointment to enable each to prepare (e.g., creating ducat lists and readying needed equipment).

This use case assists the Scheduler to schedule the Initial Dental Screening for an offender.

Trigger Events

- Request for a Dental Screening appointment received by Scheduler.

Precondition

- The Bus Screen has been recorded.
- Panorex has been made
- A request for a Dental Screening has been generated in the system by the Bus Screen Nurse
- A dentist as reviewed the Panorex and determined that a face-to-face Dental Screen is necessary

Post condition

- A Dental Screening is scheduled.

Use Case Flow

1. The Scheduler brings up the “Schedule Dental Screen” screen and the system shall display a queue of referrals to be scheduled.
    a. The system shall allow the Scheduler to sort or search the queue (e.g., by due date, etc.)
2. The Scheduler selects a request from the list and the system shall display a list of available care providers to conduct the Dental Screening.
3. The Scheduler selects a care provider and the system shall display the possible appointment times based on the offender calendar and availability of the care provider.
    a. The system shall indicate if an appointment is in conflict with mandated timelines.
    b. The system shall indicate if there are potential scheduling conflicts.
4. The Scheduler will then schedule the appointment.
5. The system shall schedule the appointment on the care provider and offender calendars.
6. The system shall notify custody of the scheduled appointment (generate a ducat list) and the care provider.
    a. The system shall notify appropriate personnel (Associate Warden of Health Care Services, and/or ADA coordinator) if the offender requires special accommodations, e.g., interpreter, wheel chair.

Associations to other use cases

- None

Alternative Flow

- A scheduler may contact the care provider and negotiate a time not on the schedule.
  - The system should not restrict scheduling to only times shown as available.
  - The system needs to notify custody and others involved about potential conflicts.

1.4.3 Record Dental Encounter

Actor
Dentist (or designee)

Purpose and Objectives
After examining the offender, the Dentist will log into HCSS and search for the offender's record. After locating and selecting the offender, the system will prompt the Dentist to indicate that an encounter took place and allow the Dentist to indicate if further evaluation is needed. HCSS will also track the date, time, and name of the Dentist who conducted the encounter. The Dentist will be prompted to consider an appointment request if further evaluation is needed. After possibly generating an appointment request, custody will be notified of the encounter. Any appointments requested will be routed to the appropriate scheduler.

This use case assists the Dentist to record a dental care encounter.

Trigger Events

- Offender shows up for the dental appointment
- Appointment time has come and offender does not show up, see alternate flow

Precondition

- The dental appointment has been scheduled.

Post condition

- Dental appointment has been conducted and disposition is recorded in the system.
- A request for appointment is generated if further attention is needed.

Use Case Flow

1. The Dentist conducts the encounter and completes all required documentation outside the system.
2. The Dentist will log into the HCSS and bring up the appointment to record the encounter in the system:

   a. Show/no-show
   b. Duration of the encounter
3. The Dentist records disposition:
   a. Confirm/change the DPC
   b. The offender requires further dental care and an appointment needs to be scheduled.
   c. The offender does not require further Dentist initiated dental care and the offender will be scheduled for routine appointments based on policies and procedures.
      i. The Dentist will be prompted to indicate if further treatment should continue..
      ii. The Dentist will be prompted to indicate if they recommended the offender request another appointment.
4. If criteria for further appointments are met, The Dentist will select the type of appointment and the system will generate an appointment request.
   a. The system shall route an appointment request to the Scheduler for an appointment.

Associations to other use cases

- None

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Dentist to enter the reason for no-show (drop down with approx. 12 reasons).
  - The system shall then notify custody of no-shows.
  - If refusal, the system shall prompt for the offender to be seen to sign the refusal form and for educational counseling.
  - The system shall prompt the Dentist to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.4.4 Record Dental Screening

Actor
Dentist (or designee)

Purpose and Objectives

All offenders have a request for a “Dental Screening” appointment automatically generated by HCSS at the time of arriving at the RC. Once the Dental Screen has been scheduled, the appointment occurs. All offenders are required to undergo the Dental Screen to provide institutions with the information needed to ensure quality care. Information from the Dental Screen is used to generate CHRONO records that inform custody of limited medical information that is needed for placement/endorsement of the offender. These CHRONOs are updated on a regular basis. The CHRONOS are stored and maintained in SOMS.

Offenders do not always arrive at their appointments. Offenders that do not arrive at the Dental Screen are recorded in HCSS as a “no-show” and a reason code is entered. Custody is notified of each “no-show.” Offenders do not show up for appointments for a number of reasons, such as appointment conflicts, transfers, or offender refusal. If the Offender does arrive, the Dental Screen is conducted by the Dentist. The Dentist records the offender’s attendance and disposition. If the Dentist determines an offender meets the criteria for further dental attention, the provider selects the appropriate option in HCSS and the system will generate a request for an appointment (e.g., Dental follow-up appointment). If the criteria for further dental attention are not met, the provider does not initiate an appointment request.

This use case assists the Dentist to record the Dental Screen.

Trigger Events

- Offender shows up for the Dental Screen appointment
- Appointment time has come and offender does not show up, see alternate flow

Precondition

- The Dental Screen has been scheduled.

Post condition

- Dental Screen has been conducted and disposition is recorded in the system.
- A request for appointment is generated if further attention is needed.

Use Case Flow

1. The Dental Screen is conducted and all required documentation is completed outside the system.
2. The Dentist (or designee) will log into the HCSS and bring up the appointment to record the encounter in the system:
    a. Show/no-show
    b. Duration of the encounter
    c. Panorex Refusal (yes/no)
3. The Dentist records disposition:
    a. The offender responded “yes” to any of the 4 diagnostic interview questions and a DDS visit is required within 3 days
        i. A request for appointment is generated in the system

b. No visit is required and the offender can be assigned an Administrative Placement Screening Dental Priority Code (APS DPC) once a Dentist reviews the Panorex. (

i. If a Dentist's designee (e.g., dental assistant) conducts the dental screen, the system shall notify the Dentist to assign an APS DPC. See usecase: "Record Administrative Placement Screening Dental Priority Code (APS DPC)"

ii. If the dental screen is conducted by a Dentist, the system shall allow an APS DPC to be selected (via drop-down menu) at the time of Dental Screen recording.

4. If the offender requires an appointment, the system will generate an appointment request.

a. The system shall route an appointment request to the Scheduler for a DDS appointment.

Associations to other use cases

- None

Alternative Flow

- If the offender does not show up for the appointment, the system shall prompt the Dentist to enter the reason for no-show (drop down with approx. 12 reasons).
  - If refusal, the system shall prompt for the offender to be seen to sign the refusal form and for educational counseling.
  - The system shall then notify custody of no-shows.
- The system shall prompt the Dentist (or designee) to indicate if a new request for the missed appointment should be generated. The system shall calculate the due date based on the date of the original request.

1.4.5 Record Dental Priority Code (DPC)

Actor
Dentist (or designee)

Purpose and Objectives

Upon completion of the Panorex conducted by a Dental Assistant, the dentist conducts a review of the records and Panorexes then assigns a Dental Priority Code (DPC) for each offender. The DPC indicates if an offender can be transferred to a mainline or special program. DPC's are updated any time an offender sees a Dentist either based on a routine examination, a request for service appointment, or an emergency. DPCs are categorized as follows:

- Priority 1A – Treatment within 24 hours of dental triage.

- Priority 1B – Treatment within 30 days of dental triage.
- Priority 1C – Treatment within 60 days of dental triage.
- Priority 2 – Treatment within 120 days of dental triage (Offenders must have over 6 months incarceration time remaining to qualify).
- Priority 3 – Treatment within 1 year of dental triage. (Offender must have over 12 months incarceration time remaining to qualify and must meet self-care requirements).
- Priority 4 – No Dental care needed.
- Priority 5 – Special needs case.

This use case assists the Dentist to record the Dental Priority Code (DPC) in the system.

Trigger Events

- DPC for offender has been determined

Precondition

- Dental Screen is complete

Post condition

- DPC is entered in the system

Use Case Flow

1. The Dentist (or designee) will log into the HCSS and bring up the “Record DPC” screen.
2. The system shall display a template for the Dentist to search for an offender by name, CDCR#, alias, location etc.
3. The Dentist searches for an offender and the system shall display a list of offenders that match the search criteria.
4. The Dentist selects an offender from the list and enters the DPC:
    a. Priority 1A – Treatment within 24 hours of dental triage.
    b. Priority 1B – Treatment within 30 days of dental triage.
    c. Priority 1C – Treatment within 60 days of dental triage.
    d. Priority 2 – Treatment within 120 days of dental triage (Offenders must have over 6 months incarceration time remaining to qualify).
    e. Priority 3 – Treatment within 1 year of dental triage. (Offender must have over 12 months incarceration time remaining to qualify and must meet self-care requirements).
    f. Priority 4 – No Dental care needed.
    g. Priority 5 – Special needs case.
5. Based on the Dental Priority Code assigned, the system shall automatically generate appointment requests for routine appointments.

Associations to other use cases

- None

Alternative Flow

- None

1.4.6 Transfer Offender (sending institution)

Actor
Dentist (or designee)

Purpose and Objectives
Offender transfers between CDCR institutions provide a significant challenge to the continuity of quality offender health care. Within a single institution, care providers are able to navigate the dynamic environment of scheduling offenders across three health disciplines and a custody system by often relying on established relationships and communications that were fostered by close proximity. Those relationships and communications do not often extend between institutions, which may be more than 500 miles apart. HCSS provides an opportunity to effectively communicate information about an offender's pre-transfer schedule to a receiving institution, while allowing resources to be efficiently re-tasked by the sending institution.

Offenders sometimes transfer with little prior notice, or with a great deal of notice and postponements. Because of this variability, care providers must continue scheduling appointments, meetings, and treatment until the offender is actually transferred. When an offender is expected to transfer, HCSS will be notified through its interface with SOMS. HCSS will alert the offender's Dentist (or designee) to prepare for the actual transfer, or alternately place a hold for dental reasons. When the actual transfer occurs, the Dentist will log into HCSS and select the offender. The system will display all pending and scheduled appointments and the Dentist will select to suspend them and enter a reason code (transfer). The system will record the name, date, and time of the person who suspended the appointments. The system will route notifications to all clinical staff assigned to the offender about the suspensions and transfer, to allow for an efficient reallocation of appointments to other offenders in need. Information on previously scheduled and suspended appointments will be made available to the receiving institution. This scenario may occur any time providers change, even if within the same institution.

This use case assists the Dentist (or designee) to record an offender transfer.

Trigger Events

- Offender transfers

Precondition

- Offender pending transfer has been recorded in SOMS

- The Dentist has been notified of pending transfers (inbox shows cases of pending transfers)
- The Dentist has access to all scheduled appointments incl. reason for appointment

Post condition

- Pending appointments with sending institutions have been suspended and receiving institution is notified to reschedule pending appointments.

Use Case Flow

1. The Dentist (or designee) logs into HCSS and brings up the queue with offenders to be transferred.
2. The Dentist selects an offender from the list.
3. The system shall display all pending requests and scheduled appointments.
4. The system shall display the option to suspend all or selected pending and scheduled appointments.
    a. For temporary transfers (e.g., out to court, etc.) the Dentist may suspend appointments only for the time period associated with the offender absence.
    b. The system will notify of any urgent appointments being suspended.
    c. The system shall allow the entry of a reason code for suspend actions.
    d. The system shall track the date, time, and name of the person who suspended the appointments.
5. The system shall notify all clinical staff assigned to the offender about the cancellations and transfer.

Note: It is assumed that when the offender is assigned to the receiving institution Dentist, the receiving Dentist can view a complete appointment history including status (e.g. suspended appointments as a result of transfer). It is the assumption that the receiving Dentist is responsible for determining next actions.

Associations to other use cases

- Predecessor to “Record Transfer (R&R receiving)

Alternative Flow

- The Dentist may request a hold for Dental reasons.
- In the case of release or parole, the scheduled and pending appointments will be canceled at the actual time of release. Their prior existence will remain in the HCSS offender log.

1.4.7 Record Transfer (receiving R&R)

Actor
R&R Nurse

Purpose and Objectives
SOMS will notify HCSS of the pending and actual transfer of an offender. The offender will arrive at the receiving institution's R&R, where the R&R Nurse will screen the offender for health care related issues and needs. After the screening, it is envisioned that the R&R Nurse will log into HCSS to record the arrival and encounter related to the completed transfer, followed by the Nurse requesting any further evaluations deemed necessary. The system will record the Nurse's name and the date and time of arrival. It is envisioned that the system will automatically generate requests for a Dentist (or designee) to review the UHR. The system will route this request, and any further encounters requested by the R&R Nurse, to the appropriate schedulers.

This use case assists the R&R Nurse to record offender transfer at the receiving institution.

Trigger Events
- The offender arrives at the receiving institution.

Precondition
- The prison to prison Offender transfer has been recorded in SOMS.
- The offender has been transferred.

Post condition
- The offender has been received, housed, and an R&R screen has been scheduled.

Use Case Flow

1. The R&R nurse brings up the queue of offenders being received.
2. R&R Nurse conducts screen.
3. The R&R nurse selects an offender from the list and marks that the offender has arrived and the disposition.
    a. There is an emergency and the patient needs immediate care (e.g. TTA, CTC, etc.).
    b. Screen criteria are met requiring an offender referral for further evaluation.
    c. The offender does not require any further evaluation.
4. The system shall:
    a. Generate a request for an appointment if the R&R Nurse indicates need.
    b. Generate a request for a Dentist (or designee) to review the UHR.
    c. The system shall notify the Scheduler(s) of appointment requests (pre-transfer pending appointments and potential new appointments).

Associations to other use cases

- Successor to Record Transfer (sending institution)
- Predecessor to Record Transfer (receiving institution)

Alternative Flow

- None

1.4.8 Transfer Offender (receiving institution)

Actor
Dentist (or designee)

Purpose and Objectives
Offenders are frequently received from other institutions with very little accompanying health information. This lack of information results in the receiving institution having to schedule and perform screenings and evaluations as if the offender were new to the CDCR system so that quality health care is assured. HCSS records all scheduled and pending appointments and clinical encounters, creating a window into the past for receiving institutions to be able to verify that necessary encounters have taken place and when. This HCSS log of offender activity is envisioned to be accessible by receiving Dentists to determine next steps once the offender has transferred.

HCSS will be notified by SOMS when an offender is expected to arrive at a receiving institution. A Dentist(or designee) will be assigned and will monitor when the offender has arrived. When the transfer is complete, an assigned Dentist (or designee) will log into HCSS, select the offender, and review the pre-transfer pending and canceled appointments. The Dentist will be responsible for deciding which, if any of the appointments, should be requested at the new institution. The system will allow the Dentist (or designee) at the receiving institution to request that a previously scheduled or pending appointment from the sending institution be placed on his/her schedule and the system will route the appointment requests to the appropriate scheduler.

This use case assists the Dentist (or designee) to request scheduling of pre-transfer pending or canceled appointments at the receiving institution.

Trigger Events

- Offender arrives at receiving institution

Precondition

- Offender transfer has been recorded in SOMS
- Scheduled and pending appointments at the sending institution have been suspended.

Post condition

- Scheduler at receiving institutions has requested pre-transfer scheduled and pending appointments be scheduled.

Use Case Flow

1. The Dentist logs into HCSS and brings up the queue with newly arrived offenders from other institutions.
2. The Dentist selects an offender from the list.
3. The Dentist will review the pending and suspended appointments from the previous institution.
4. The system shall allow the Dentist to select a previously scheduled or pending appointment from the sending institution in order to generate a new request at the receiving institution.
    a. The system shall allow for the cancellation of pre-transfer scheduled or pending appointments with reason code.
        i. The system shall record the user name, date, and time of cancellation.
    b. Newly generated requests will maintain the information contained in the original request, including due date, etc.
5. The system shall route any generated requests to the assigned Scheduler.

Associations to other use cases

- None

Alternative Flow

- None

1.4.9 Record CDCR Health Care Services Request Form #7362

Actor
Triage Nurse

Purpose and Objectives
Offenders fill out a CDCR Health Care Services Request Form #7362 when they would like to see a care provider. The forms are available at multiple locations throughout an institution. Offenders fill out their name, CDCR#, housing unit, date, the type of care sought (Medical, Psychiatry, Dental, or Pharmacy) and the reason they are requesting the visit. Some levels of care allow for verbal requests because of physical restraints or offender disability, and often in that situation a request is written on the offender's behalf. All request forms are deposited in a drop box that is required by policies and procedures to be emptied once a day, but is usually checked at least 2 or 3 times daily.

The Triage Nurse views each request and enters it into HCSS, being sure to fill out each entry including the target discipline (dental, medical, etc.). The system will then route the requests to the indicated disciplines where they will decide on further actions. The #7362s will join staff & custody referrals in the queue of "Sick Call Referrals & Requests." The collection and sorting of the requests should be tracked by the system to ensure compliance with policies and procedures.

This use case assists the Triage Nurse to record a CDCR Health Care Services Request Form #7362 in the HCSS.

Trigger Events

- The offender has completed the CDCR Health Care Services Request Form #7362.

Precondition

- None

Post condition

- The Nurse has recorded the #7362 and the Scheduler is notified.

Use Case Flow

6. The Nurse brings up the "Record CDCR Form #7362" screen and searches for the offender who submitted the 7362.
    b. The system shall allow the Nurse to search for the offender by housing unit, name, CDCR#, alias, location, etc.
7. The system shall display a list with matching names and the Nurse will select the name of the offender who has filed the #7362.
    c. Offender, date, and time of the 7362 submission shall be recorded by the system.
    d. The system shall display any previously filed requests by the same offender since last being seen by a case manager or clinician.
        ii. The Nurse shall have the capability to link a new request to an existing pending request.
8. The system shall display a template for the Nurse to enter information from the #7362 form:
    c. Type of request (1 or more):
        v. Medical
        vi. Psychiatry
        vii. Dental
        viii. Pharmacy
    d. Reason for requesting health care services.

9. The system shall record the date, time, and name of the Nurse who reviewed and entered the #7362 information.
10. The system shall forward requests to the appropriate health care disciplines to be reviewed.

Associations to other use cases

- This use case is a predecessor to "Record Sick Call Referral Request & Triage."

Alternative Flow

- Offenders may also use kiosks available to them in the housing unit to enter requests for health care themselves. In this case, requests are routed directly to the respective discipline(s).
- Custody may enter a 7362 through a portal.

1.4.10 Request for Service Triage

Actor
Dentist

Purpose and Objectives
A nurse collects all offender requests for service (CDCR Form #7362), enters them into the HCSS, and the system routes the requests to the correct disciplines. Each discipline receives these requests in a "Sick Call Referrals & Requests" queue. Also within the queue are other appointment requests and referrals such as: staff & custody referrals based on offender observations, verbal self-referrals from offenders entered into the system, requests originally written on napkins, or any other offender act used to be referred to a Care Provider.

The Dentist or designee is able to sort and search the "Sick Call Referrals & Requests" queue based on any fields (Due Date, CDCR#, Offender Name, etc.). A "reason for request" summary appears in the queue display to allow the Dentist to survey all requests and triage them according to needed care through the issuance of Provisional DPC Codes.

If the Dentist determines a request to be urgent, the system will immediately note the urgency of the request and route it the scheduler. The requesting offender's dental clinic will also be notified and the request due date will reflect an urgent need. The urgent status of the request will be recorded in HCSS. The Scheduler will schedule the appointment as soon as possible, and may manually contact care providers to ensure availability within policy and procedure timeframes.

If a requesting offender is classified by Provisional DPC as routine, the system shall route the request to a scheduler. The routine status of the request will be recorded in HCSS. The offender's dental clinic will be notified and the appointment request due date will be set within the timeframe set by policies and procedures.

This use case assists the Dentist or designee to triage a Sick Call Request / Referral that has been received.

Trigger Events

- Health Care Services Request form or other request/referral for care is delivered to the Dental clinic.

Precondition

- Health Care Services Request form has been recorded in the system.

Post condition

- A provisional DPC has been assigned.
- Health Care Services Request form is date and time stamped and routed to the appropriate Scheduler.

Use Case Flow

1. The Dentist or designee logs into the system and opens the queue of "Sick Call Referrals & Requests."
    a. The system shall display requests in the order of the time they were submitted.
2. The system shall allow for the list of requests to be displayed with "Reason for Request" summary information to aid the Dentist's assessment of each request's severity.
    a. The Dentist will do a preliminary prioritization of offender needs and then leave the system to confirm these conclusions with a face-to-face triage. (see alternate flow)
3. The Dentist will log in, select a request, and the system shall display the Provisional DPC code options for selection via drop-down menu. .
    a. If a Provisional DPC of 1, the system shall notify the Scheduler to schedule a Dental appointment within 72 hours.
    b. If a Provisional DPC >1, the system shall notify the Scheduler to schedule a Dental appointment within 10 days.
4. The system shall record the date and time of each request's reception by the Dental Clinic, and the date and time of DDS assignment of a Provisional DPC.
5. The system shall route any and all appointment requests to the appropriate Scheduler.

Associations to other use cases

- Successor to "Record CDCR Health Care Services Request Form #7362."

Alternative Flow

- None

1.4.11 Request to Schedule an Appointment

Actor

Requestor

Purpose and Objectives

Routine appointment requests will be automatically generated by HCSS and routed to the appropriate scheduler. These automatic requests are based in policy and procedure requirements, such as dental birth-month exams being required every 1 or 2 years depending on an offender's age, or the required periodic appointments while an offender waits for a specialty care visit to be approved. When other circumstances require an appointment, the Requestor will log into HCSS and request an appointment to be scheduled.

Once they are logged into the system, the Requestor will select an offender and type of appointment. The system will suggest required attendees based on care providers currently assigned to the offender and offender location. The Requestor is free to select from the suggested attendees, or search for other care providers to invite. The Requestor may also select care providers as optional attendees to allow the Scheduler greater flexibility in scheduling (it is harder to set an appointment time when there are many required attendees). After selecting the attendee(s), the Requestor will enter a preferred range of times for the appointment to be held (the system shall alert the Requestor if the preferred times are outside of those in the policies and procedures). The appointment request will be routed to the Scheduler to set up the meeting.

This use case assists the Requestor with requesting an appointment.

Trigger Events

- The Requestor determines circumstances warrant an appointment (e.g., a need for specialty care, lab work, radiology, dental care, psychiatric care, etc.).

Precondition

- Circumstances require an appointment.

Post condition

- An appointment has been requested.

Use Case Flow

8. The Requestor logs into HCSS and brings up the "Appointment Request" screen.

9. The system shall display and allow offender records to be sorted and searched, allowing the Requestor to select the offender for whom the appointment is needed.
10. The Requestor shall indicate the type of appointment needed (lab, radiology, etc.).
11. The system shall then suggest provider(s) based on assigned clinicians, offender location, etc., and allow the Requestor to select required and optional attendees. (e.g., for offender peer-education programs, Mental Health IDTTs, telemedicine, etc.)
    b. The system shall allow for the invitation of additional attendees.
12. The system shall prompt the Requestor for a preferred range of appointment dates within mandated timeframes.
13. The system shall prompt the Requestor to indicate any dependant appointments (e.g. medical consult completion or dental prosthetic returned from lab prior to appointment).
    b. The system shall verify dependant appointments are scheduled, or notify the scheduler to generate a request if not.
14. The system shall generate the appointment request.
    c. If the appointment requires approval from a regulating individual or committee (e.g., Utilization Management, DAR, etc.) the system shall route the request to the appropriate person(s) for approval.
        iv. If policies and procedures dictate, the system will generate automatic appointment requests during the wait time associated with specialty care approval to ensure the offender's condition remains stable.
        v. If approved, the request will be routed by the system to the appropriate Scheduler.
        vi. If declined, see alternative flow.
    d. If the appointment does not require prior approval, the system shall route the request to the appropriate scheduler.

Associations to other use cases

- Predecessor to "Schedule Appointment."

Alternative Flow

- If an appointment request requires approval that is ultimately denied, the regulating committee will enter the decision into the system.
  - The appointment request will be canceled, by reasons of the regulating committee.
    - The date and time of cancellation will be recorded, as well as the name of the deciding person or committee.
  - The original Requestor will be notified of the decision.

1.4.12 Schedule Appointment

Actor
Scheduler

Purpose and Objectives
An appointment can be scheduled for any type of care (e.g., PCP visit, Dental exam, Mental Health Case Manager, etc.). A request is created in HCSS and assigned a specific due date based upon policies and procedures. A request may include a single appointment or a series of

appointments (e.g. or 5 appointments for the fabrication and delivery of a dental removable prosthetic). The request is routed to a scheduler whose role is to minimize conflicts while scheduling appointments to be completed within policy-specified limits.

The Scheduler logs into HCSS and selects the “Schedule Appointment” queue, and then selects and views a request. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). If a Care Provider is not specified, the Scheduler may “select all” providers and view all provider availability for the appointment by time slot. The system shall then display the available appointment times. If a specific Care Provider and time are requested, the Scheduler may manually contact the parties involved if the current schedules conflict with the request. The Scheduler will select an appointment time and schedule the appointment on the offender and provider calendars. A notification of the new appointment will be sent by the system to the offender’s Case Manager/Care Coordinator (if existing), the Care Provider scheduled, and to custody.

This use case assists the Scheduler with scheduling an appointment.

Trigger Events

- Request received in Scheduler’s inbox

Precondition

- Request has been generated by a Requestor

Post condition

- Appointment is scheduled

Use Case Flow

7. The Scheduler brings up the “Schedule Appointments” screen and the system shall display a queue of appointment requests to be scheduled.
    b. The system shall allow the Scheduler to search or sort the request queue by any field (due date, offender, Care Coordinator, required participants, etc.).
8. The Scheduler selects a request from the queue and the system shall display a list of available care providers to conduct the appointment, report a requested provider if any, and suggest some providers based on offender information (e.g., housing unit, current level of care, assigned providers, previous providers etc.).
9. The Scheduler selects a care provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
    c. The system shall indicate if a suggested appointment is in conflict with mandated timelines.
    d. The system shall indicate if there are potential scheduling conflicts (see Use Case Resolve Scheduling Conflict).
10. The Scheduler will schedule the appointment.

11. The system shall schedule the appointment on the Care Provider and offender calendars.
12. The system shall notify medical records and custody of the scheduled appointment (generate a ducat list).
    d. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.
    e. The system shall notify nursing of any pre-visit preparations
    f. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.4.13 Reschedule Appointment

Actor
Scheduler

Purpose and Objectives
An appointment may need to be rescheduled for a variety of reasons such as, mandatory court hearings, emergencies, appointments of higher priority, institution lockdowns, or other events resulting in an offender “no-show” at a scheduled appointment. In the case of an event like an institution lockdown, the Scheduler will be allowed to move large blocks of appointments to other days When an individual offender is recorded as a “no-show,” the system will automatically generate a new request for that appointment, maintaining the information and due date of the original request. The request will be identifiable to a scheduler as a request to reschedule.

The Scheduler logs into HCSS and selects the “Reschedule Appointment” queue, and is able to search and/or sort the queue by any request field (date, offender, Case Manager, required participants, etc.). Appointments needing to be rescheduled will have due dates that are closer to expiration than other requests and may therefore have a higher priority. The Scheduler selects and views the request. If an appointment request specifies a particular Care Provider, the Scheduler will locate the provider name within the system and view their calendar availability for the type of appointment requested (e.g., a full evaluation or a short follow-up). HCSS will suggest and highlight the provider previously scheduled when rescheduling an appointment. If a care provider is not specified, the Scheduler may “select all” providers and view all provider availability for the appointment by time slot. The system shall then display the available appointment times. If there are no available appointment times due to the shorter timeframe of rescheduling, the Scheduler may manually contact the parties involved to ensure the

appointment is scheduled before the due date. The Scheduler will select an appointment time and schedule the appointment. A notification of the new appointment will be sent by the system to the offender case manager/care coordinator (if existing), the care provider scheduled, medical records, and to custody.

This use case assists the Scheduler to reschedule an appointment for an offender.

Trigger Events

- An offender is recorded as a “no show” for an appointment.
- An appointment has been cancelled

Precondition

- An appointment has been scheduled for an offender

Post condition

- An appointment is scheduled before the due date.

Use Case Flow

7. The Scheduler logs into HCSS and brings up the “Reschedule Appointments” screen and the system shall display a queue of appointment requests to be rescheduled.
    c. The system shall allow the Scheduler to search or sort the request queue by any field (date, offender, Case Manager, required participants, etc.).
    d. Appointments needing to be rescheduled will maintain the due date of the original appointment request and all other information (dependencies, etc.)
8. The Scheduler selects a request from the queue and the system shall display a list of available care providers and suggest providers based on offender information (e.g., housing unit location, current level of care, assigned providers, etc.).
    b. The system shall highlight the Care Provider previously scheduled for the appointment
9. The Scheduler selects a Care Provider and the system shall display possible appointment times based on the offender calendar and care provider availability:
    d. The system shall indicate if an appointment is in conflict with mandated timelines.
    e. The system shall indicate if there are potential scheduling conflicts(see Use Case Resolve Scheduling Conflict).
    f. The system shall indicate if there are unscheduled dependencies and prompt for a request to be generated for scheduling.
10. The Scheduler will schedule the appointment.
11. The system shall schedule the appointment on the Care Provider and offender calendars.
12. The system shall notify custody of the scheduled appointment (generate a ducat list).

d. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.

e. The system shall notify Care Provider of any pre-visit preparations

f. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.4.14 Resolve Scheduling Conflict

Actor
Scheduler

Purpose and Objectives
Although coordination of scheduling among the various health care disciplines and insight into an offender's calendar will greatly reduce scheduling conflicts from occurring in the first place, conflicts will still happen in the future due to changing offender commitments, constrained availability of certain care providers, or because an offender has missed several previously scheduled appointments.

The system shall notify schedulers of these conflicts and allow the routing of these appointment requests to a Scheduler for resolution. While the actual resolution will remain a manual process, including phone calls and possible in-person meetings by a conflict resolution team, the system shall allow the Scheduler to record the steps taken to resolve the conflict in the system.
Upon resolution of the conflict, the Scheduler will schedule the appointment in the system.

This use case assists the Scheduler to enter a conflict resolution in the system and reschedule the appointment.

Trigger Events

- A health care appointment has been previously scheduled or is being scheduled, and another conflicting commitment has appeared on the offender calendar.

Precondition

- A health care appointment cannot be scheduled within mandated timeframe due to other offender commitments.

Post condition

- The scheduling conflict has been resolved and the health care appointment is scheduled.
- If mandated timeframes have been violated due to a scheduling conflict, a reason is entered in the system.

Use Case Flow

8. The Scheduler brings up the "Scheduling Conflict Resolution" screen and the system shall display a list of appointments that currently have a scheduling conflict.
9. The Scheduler selects an appointment from the list and the system shall display offender name, appointment type, care provider requested, and due date of appointment.
10. The Scheduler will then do one or several of the following (outside the system):
    e. Contact other care providers if the conflict can be resolved by rescheduling other health care appointments.
    f. Contact custody to see if another offender commitment can be rescheduled.
    g. Contact the requested care provider to see if another appointment time is available.
    h. Forward the conflict to be resolved by an interdisciplinary conflict resolution team.
11. If the scheduling conflict can be resolved, the scheduler will schedule the appointment in the system.
12. If the conflict cannot be resolved, the Scheduler will schedule the appointment at a time after the mandated deadline.
    c. The system shall prompt the Scheduler to indicate the reason for missing the deadline.
    d. The system shall allow the Scheduler to document the steps and measures taken to resolve the conflict in a manner that would have allowed complying with the mandated timeline.
13. The system shall schedule the appointment on the care provider and offender calendars.
14. The system shall notify custody of the scheduled appointment (generate a ducat list) and the care provider.
    d. The system shall notify the AW and or ADA coordinator if the offender requires any accommodations.
    e. The system shall notify Care Provider of any pre-visit preparations
    f. The system will notify the Care Provider of any appointment dependencies (e.g., labs to be completed prior, etc.)

Associations to other use cases

- None

Alternative Flow

- None

1.4.15 Record TTA Encounter

Actor
Care Provider

Purpose and Objectives
It is impossible to schedule emergencies; therefore, encounters between an offender taken to the Triage and Treatment Area (TTA) and the Care Provider-on-call cannot be formally requested or scheduled. The encounters can, however, be recorded after their occurrence in order to inform current treatment and report on offender access to care. Offenders are taken to the TTA for emergency care regardless of discipline. Offenders that arrive are evaluated and treated by the TTA Care Provider on duty, or the after hours Care Provider-on-call.

After treating the offender in the TTA, the Care Provider will log into HCSS and search for the offender's record. After locating and selecting the offender, the system will prompt the Care Provider to indicate that an encounter took place and allow the Care Provider to indicate if further evaluation is needed. HCSS will track the date, time, and name of the Care Provider who conducted the encounter. The Care Provider will be prompted to consider an appointment request if further evaluation is needed. After possibly generating an appointment request, the offender's Care Coordinator/Case Manager will be notified of the encounter. Any appointments requested will be routed to the appropriate scheduler.

This use case assists the Care Provider to record the TTA Encounter.

Trigger Events
- Offender brought to TTA for emergent treatment

Precondition
- None

Post condition
- Offender treated in the TTA by the Care Provider and the disposition is recorded in the system.

Use Case Flow

5. The Care Provider conducts the encounter and completes all required documentation outside of HCSS.
6. The Care Provider will log into HCSS and bring up the offender to record the encounter in the system:
    c. The event occurred—including date, time, and provider name.

   d. Duration of encounter

7. The system shall allow the Care Provider to generate requests if encounter outcomes warrant:
   d. Follow-up visit(s)
   e. Appointment(s) by discipline
   f. Transfer for specialty care
8. The system shall notify:
   d. The Scheduler to schedule further appointments
   e. The offender Care Coordinator/Case Manager (if existing)
   f. The Specialty Care Administrator if applicable
   g. Medical Records

Associations to other use cases

- None

Alternative Flow

- None

1.4.16 Record Clinical Rounds Encounter

Actor
Care Provider

Purpose and Objectives
Care Providers conduct daily rounds to assess offender health and progress with current treatment. Because of the informal process of meeting with patients, the scheduling of Care Provider rounds is not within the HCSS scope. However, the record of these encounters between Care Providers and offenders is useful for assessing the quality and access to care provided to offenders and should be tracked.

After completing a series of offender encounters while on rounds, it is envisioned that the Care Provider or designee will log into HCSS and display a list of all offenders currently located at the in-patient housing. The Care Provider will select all offenders encountered during rounds and select the encounter type “Clinical Rounds.” For each offender, the system will prompt the Care Provider to record the encounter took place and allow the Care Provider to indicate if further evaluation is needed. HCSS will also track the date, time, and name of the Care Provider conducting the encounter. The Care Provider will be prompted to consider an appointment request if further evaluation is needed. Each offender’s Care Coordinator/Case Manager will be notified of the encounter and any appointments requested.

This use case assists the Care Provider to record encounters with offenders occurring during clinical rounds.

Trigger Events

- Care Provider has completed clinical rounds

Precondition

- Care Provider is scheduled for clinical rounds

Post condition

- Clinical rounds are recorded in the system.

Use Case Flow

8. The Care Provider conducts all offender encounters and completes all required documentation for rounds outside the HCSS.
9. The Care Provider logs in to the system and brings up the list of offenders currently located at the in-patient housing.
10. The system shall allow the Care Provider to select all offenders visited during rounds and allow the Care Provider to select the encounter type “clinical rounds.”
11. For each offender, the system shall prompt the Care Provider to indicate that the encounter took place.
    b. The system shall record date, time, and Name of the Care Provider who conducted rounds.
12. The system shall allow the Care Provider to indicate if further evaluation is required.
    b. If further evaluation needed, the system shall allow the Care Provider to request an appointment.
13. The system shall notify the Case Manager/Care Coordinator of the request.
14. The system shall route the request to the Scheduler.
15. The system shall notify Medical Records.

Associations to other use cases

- None

Alternative Flow

- None

1.4.17 Assign Scheduler

Actor

Administrator

Purpose and Objectives
Requests for appointments can be generated by various actors, such as the 7362 Triage Nurse, a clinician who requests a follow up appointment, a utilization manager who approves a specialty care appointment etc. The requests will indicate the type of appointment as well as the mandated timeframe in which the appointment must occur. Appointment requests of the same type form a pool of requests that will be scheduled by a Scheduler.

The HCSS shall have the capability to organize the requests by discipline, offender location, time of appointment, urgency, care provider etc. Request pools will be assigned by an Administrator to Schedulers who have the responsibility to schedule the appointments. Schedulers should be able to schedule appointment regardless of their location, thereby allowing for a centralized approach to scheduling for telemedicine and specialty care appointments.

This use case assists the Administrator to assign a Scheduler to a pool of requests to be scheduled.

Trigger Events
- None

Precondition
- Schedulers are in the system, including their location, specialty and other relevant skills (e.g. language).
- Request pools have been defined.

Post condition
- A scheduler has been assigned to one or multiple request pools and the Scheduler is notified.

Use Case Flow

1. The Administrator brings up the “Assign Scheduler” screen and the system shall display a list of all request pools.
2. The Administrator selects a request pool from the list.
    a. The system shall indicate if this request pool is already assigned to a scheduler.
    b. The system shall display a list of schedulers who have the appropriate authorization and skills to schedule appointments for the selected request pool.
3. The Administrator will then select a Scheduler from the list and assign him/her to the pool of requests.
    a. The system shall allow the Administrator to assign one or multiple schedulers to a pool of requests.
    b. The system shall allow the Administrator to assign a primary and secondary Scheduler to a pool of requests.

4. The system will notify the Scheduler of the assignment and the newly assigned request pool will become part of that Scheduler's workload.

Associations to other use cases

- None

Alternative Flow

- If request pools need to be assigned to a different Scheduler, the Administrator shall have capability to remove a Scheduler from a request pool before assigning the pool to another Scheduler.

1.4.18 Assign Time Blocks for Scheduling

Actor
Administrator

Purpose and Objectives
Each clinic and each Care Provider will have blocks of time available in the system to which schedulers will be able to assign appointments. These blocks of time may vary from day to day in number and length, based on facilities, equipment, and staff available. Certain time blocks may be assigned for routine appointments, annual check-ups, etc. versus other types of care, though the care provider may be the same. Since care providers also require time for internal meetings, preparing reports, and walk-in visits, the time blocks do not directly correspond to the shift plans.

It is anticipated that the time blocks made available for scheduling will include all equipment, staff and other resources needed to complete the type of appointment that can be scheduled to the time block. As an example, it is assumed that for dental appointments the dentist, assistant (or appropriate staff coverage), chair, and x-ray machine (if required) will all be available during the assigned time block.
Administrators will be staff who are familiar with the local settings of a clinic and understand constraints of local facilities and rooms. Administrators own the calendar of an institution, clinic, or specific care provider.

This use case assists the Administrator to assign blocks of time in the scheduling system that will be made available to Schedulers for scheduling appointments.

Trigger Events

- None

Precondition

- Treatment rooms and facilities have been downloaded from BIS.

Post condition

- Blocks of time for scheduling have been identified and are available to HCSS schedulers.

Use Case Flow

5. The Administrator brings up the “Create Available Blocks of Time” screen and system shall display a list of treatment locations the Administrator is responsible for (e.g. medical clinic rooms, dental chairs, therapy rooms, etc.)
6. The Administrator selects a treatment location from the list and the system shall display the treatment location’s schedule.
7. The Administrator will then assign time blocks available for scheduling appointments:
    d. The Administrator shall indicate what type of appointments (e.g. group therapy, individual counseling etc.) can be scheduled.
    e. The Administrator shall have the option to indicate maximum capacity (e.g. 10 patients per classroom).
    f. The Administrator shall have the option to enter the length of an individual encounter (e.g. 20 minutes).
8. The system shall make the assigned blocks of time available to Schedulers.

Associations to other use cases

- None

Alternative Flow

- None