

**E-07 NON-EMERGENCY HEALTH CARE REQUESTS AND SERVICES**

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06/01/2017

**APPENDIX A: PROCEDURE/PROCESS**

1. *Patients* request non-emergency medical, dental, or mental health treatment by completing a Health Service Request (HSR) form and submitting it via their living unit's HSR deposit box.
2. A *Nursing employee (Patient Care Services)* will visit each living unit in the jail compound on a daily basis, seven days a week, and will:
  - a. Open the Health Service Request deposit box for each living unit;
    - i. Check the lock mechanism;
    - ii. Report any lock that is jammed or otherwise malfunctioning to nurse manager. The nurse manager will inform Cermak's Department of Environmental Services / Plant Operations. (The Department of Environmental Services / Plant Operations will submit a request to immediately repair or replacement).
  - b. Remove HSR's that have been deposited in the box since the previous pickup.
  - c. Log the date, number of request slips, and name or initials of the staff member on the collection log kept inside the deposit box. At end of month, collection log delivered to nurse manager.
  - d. Lock the box closed.
  - e. If any forms other than HSR are found in the box (for example, grievance forms), turn them over to designated CRWs.
  - f. Check that there is an adequate supply of HSR forms on the living unit for patient use; if not, notify the tier officer to set out more forms or to contact PCS for more forms.
  - g. Promptly deliver the forms collected to the divisional dispensary.
3. The administrative aide or other health staff member will:
  - a. Time-stamp the HSR forms promptly upon their arrival at the dispensary;
4. A nurse or other qualified health care professional will review each HSR submitted to Cermak daily within 24 hours of the form's arrival in the dispensary, seven days a week, and will:
  - a. Triage HSRs that contain requests for clinical services:
  - b. Determine an appropriate disposition for all HSR.
  - c. Act on requests the within 48 hours on weekdays and 72 hours on weekends-
    - Select forms that may be addressed with visit to the patient on the living unit:
      - See patient, notate HSRF as appropriate
      - Return to clinic, enter the forms as encounters
    - The remaining forms generate visits to the clinic:
      - Enter as before, with referrals as required.
      - Document visit with vital signs, review of systems, nursing guideline (action taken) and disposition, as indicated.
      - The HSR will be retained in the Nurse Sick Call until the patient has been seen by the nurse.
      - The nurse will turn in the all completed HSR to HIM for scanning into the EMR.
      - The Nurse Coordinator will review each HSR for completion and audit as needed.
    - For dental or mental health requests:
      - refer to next section – DENTAL HSRF FLOW
      - refer to next section – MENTAL HEALTH HSRF FLOW
  - d. Other requests:
    - Requests for refills of bulk medications are electronically requested to Pharmacy; no data entry.
    - Requests for medical diets, follow guidelines.

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- Requests for nail clipping, and miscellaneous non-medical require no data entry. Denials communicated to patient.
  - Optometry and Podiatry are ordered and directed to Scheduling queue.
5. *The administrative aide or other designated health staff member will:*
    - a. Schedule appointments for referrals as directed by the nurse
    - b. Notify the nurse, or a physician assistant or physician, of any schedule conflicts, redundant appointments, or lack of timely appointment availability, in order to resolve these problems.
    - c. Provide to CCDOC's shift commander (or to other divisional CCDOC staff, as designated in writing by the superintendent) list of patients for scheduled evaluation in each division.
      - Cermak may also provide supplemental lists of add-on patients to the shift commander or dispensary officer.
      - Add-on patients may be called down individually during the course of a scheduled clinical session, as needed.
  6. If CCDOC officers have not escorted patients for their scheduled appointments, the nurse should communicate with:
    - a. The assigned dispensary officer, the shift commander, and the superintendent in turn, as needed, until the patients are brought; and
    - b. The nurse manager, as needed to facilitate and instruct the patient in accordance with the Nursing Assessment Guidelines.
    - c. Document the encounter, including disposition "in" and "out" in the electronic medical record. If patient encounter is not documented, "out" implies a "no show".
  7. *The administrative aide*, or other designated health staff member, will schedule the patient for a follow-up appointment or a provider appointment, if ordered by the person who performed the HSR evaluation.
  8. *A provider will:*
    - a. Confer with the nurse during triage of HSR or during face-to-face nursing assessment, if requested;
    - b. Evaluate and manage those patients who are referred by the nurse for a provider visit.
  9. The timeframe for any nursing follow up will be using the following categories:

<b>Acuity Level</b>	<b>Referral Category</b>	<b>Appointment Date</b>
I	Today	Within 24 hours (same day as triaged)
II	Routine	Within 48 Hours of receipt

Note- Urgent Emergent patients are not required to complete a paper HSRF. Patients may be walked into the dispensary during the day or taken to Urgent Care 24/7 either due to a request by CCDOC or another staff member.

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**DENTAL HSRF FLOW**

RN paper triages Health Service Request Form (HSRF) and determines Dental service need

Patient complaint of swelling to face or jaw

Patient complaint of pain

Patient Asymptomatic

Nurse or medic scans  
**DHreferral@cookcountyhhs.org**

PCP, Dental or Urgent Care face to face visit (same day)

RN face to face visit (same day)

Dental Clinic for their Division will be called for Urgent Appointment for patients with noted swelling

RN calls Dental Clinic for their Division for Urgent Appointment for patient with pain greater than 5.

Dental personnel will see emergent request as soon as possible

If not seen within 10 days, dental personnel will go to the tier to perform a well-being check.

Subsequent request will result in either a repeat face to face or a well-being check on the tier

Department sends HSRF form to Health Information Management Department (HIM)

**Dental Offices Located in the following Divisions:**

Div. V- (Sees all 3 Annex (Mon 1B & 3E) and Div. II (T-F)	Ext. 4-5168 and Ext. 4-5175 Fax 4-4960
Div. VI- 3 Annex ( Mon and Wed) and Div.VI (T-F(PC/SEG))	Ext. 4-5397
Div. 8 RTU- ( Div. IV (Tue), RTU Men (MW), RTU Wom (Th), Cermak (F) )	Ext. 4-0376 Fax 4-0197
Div. IX- sees (Div. IX (Monday thru Friday)	Ext. 4-2339
Div. X- sees (Div. X (Monday thru Friday)	Ext. 4-7178
Div. XI- sees (Div. XI (Monday thru Friday and Boot Camp on Thursday)	Ext. 4-2174

Green forms are provided to patients with name and DOC number to be used by patient for subsequent dental health service requests.

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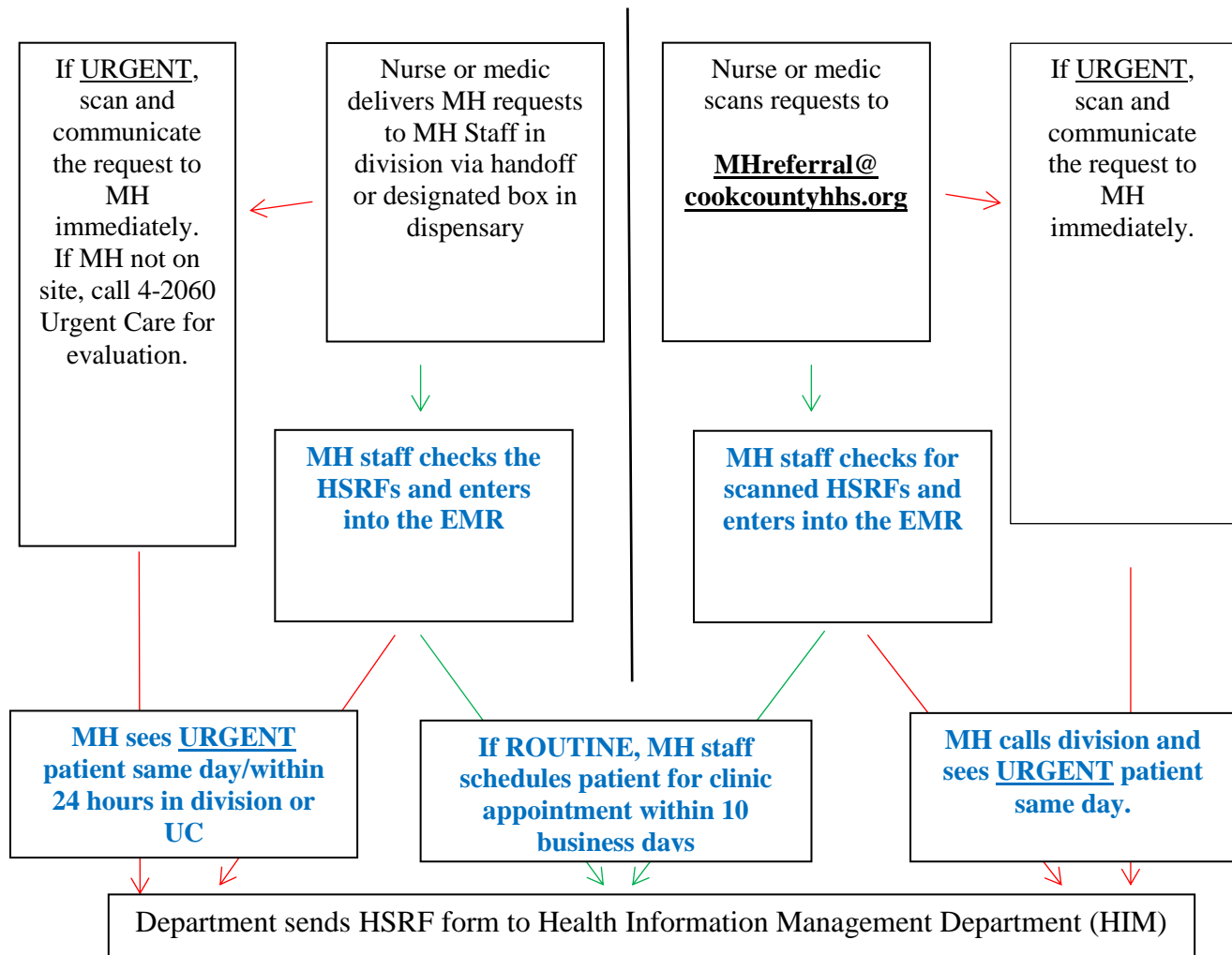
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**MENTAL HEALTH HSRF FLOW**

RN paper triages Health Service Request Form (HSRF)  
and determines Mental Health (MH) service need

**Divisions:**  
2D2, 4, 6, RTU, 9, 10

**Divisions:**  
2D1, 2D3, 2D4, 3 Annex, Div 11



- **URGENT Health Service Request forms**
  - Suicidality and or homicidality => URGENT MH request => Immediate referral to Mental Health
  - If physical symptoms of chest pain, short of breath, headaches exist, seek medical clearance first
- These are guidelines. Staffing can change due to call-ins or emergencies. **If you don't see MH staff and the request reflects an URGENT issue, PCS should scan the referral and call the UC at 4-2060**
- Before you scan - Please check that forms are complete!
  - Make sure division is clearly indicated
  - Make sure DOC number is clear