

ATTACHMENT

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EXHIBIT H

Service Level Agreement (SLA) Sheriff's Facilities

1. 14-day Health assessments

Performance Objective: The contractor will ensure that 14-day health assessments are done within 14 days of a patient's incarceration. If the patient refuses the contractor will ensure proper documentation of refusals occurs. The contractor will ensure that all tuberculin skin tests are placed as needed. If the patient refuses then the contractor will ensure that alternative methods of screening for tuberculosis are offered (i.e. Chest X-Ray then QuantiFERON® lab draw). If patient refuses all methods of screening contractor will ensure that the patient has a visual assessment completed by a mid-level provider or MD.

SLA: 90% of all inmates incarcerated will have a 14-day health assessment within 14 days.

Measurement: External chart audit by public health on a sample of 10% of inmates incarcerated for 14 days or longer in the prior calendar quarter. Analysis by Public Health will be conducted quarterly. Results from audit will be submitted to CFMG HSA and Sheriff's Office contract manger within 5 business days of audit date.

Penalty: The first quarter in which less than 90% of audited charts at the jail show compliance with the perform indicator, the Contractor must develop a written Corrective Action Plan (CAP) to the Sheriff for approval within 30 days of the audit. The Contractor will immediately implement CAP upon approval from Sheriff. Re-audit will occur on a sample of 10% of inmates meeting above criteria, beginning the quarter after the CAP was implemented. Re-Audit to be done by CFMG monthly until 90% compliance is met. Monetary penalty to be decided between Sheriff and CFMG at contract renegotiation.

2. Medication Verification

Performance Objective: Contractor shall ensure that medication verification is completed within 12 hours of a medical intake screening if the patient indicated essential or psychiatric (not to include benzo's or sleep aids) prescription drug utilization. If medications are verified, Contractor will ensure that the medications are "bridged" until patient is able to see a provider. If medications cannot be verified for essential and psychiatric conditions the nurse shall confer with the on-call medical or mental health provider (OCP) to establish, document and initiate a treatment plan if the provider is amenable to initiating treatment. This shall occur within 24 hours of arrival.

SLA: 90% of all inmates who have identified essential or psychiatric prescription medication utilization will have their medication verified and bridged regardless of formulary status (or medication of similar therapeutic class) within 24 hours. 90% of inmates who have identified essential or psychiatric prescription medication utilization whose medications cannot be verified have documented in their medical record that the nurse contacted an OCP within 24 hours.

Measurement: External chart audit by public health on a sample of 10% of inmates prescribed essential and psychiatric medication the prior calendar quarter. Analysis by Public Health will be conducted quarterly. Results from audit will be submitted to CFMG HSA and Sheriff's Office contract manger within 5 business days of audit date.

Penalty: The first quarter in which less than 90% of audited charts at the jail show compliance with the perform indicator, the Contractor must develop a written Corrective Action Plan (CAP) to the Sheriff for approval within 30 days of the audit. The Contractor will immediately implement CAP upon approval from Sheriff. Re-audit will occur on a sample of 10% of inmates meeting above criteria, beginning the quarter after the CAP was implemented. Re-Audit to be done by CFMG monthly until 90% compliance is met. Monetary penalty to be decided between Sheriff and CFMG at contract renegotiation.

3. Chronic Care

Performance objective: The contractor shall ensure that all chronic care patients (this includes major mental illness) are being seen in accordance to NCCHC standard. The contractor will ensure that if providers are treating patients outside the chronic care guidelines their reasons for deviation from protocol must be justified.

SLA: 90% of all inmates who have identified essential or psychiatric prescription medication utilization will have their medication verified and bridged regardless of formulary status (or medication of similar therapeutic class) within 24 hours. 90% of inmates who have identified essential or psychiatric prescription medication utilization whose medications cannot be verified have documented in their medical record that the nurse contacted an OCP within 24 hours.

Measurement: External chart audit by public health on a sample of 10% of inmates receiving chronic care appointments in the prior calendar quarter. Analysis by Public Health will be conducted quarterly. Results from audit will be submitted to CFMG HSA and Sheriff's Office contract manger within 5 business days of audit date.

Penalty: The first quarter in which less than 90% of audited charts at the jail show compliance with the perform indicator, the Contractor must develop a written Corrective Action Plan (CAP) to the Sheriff for approval within 30 days of the audit. The Contractor will immediately implement CAP upon approval from Sheriff. Re-audit will occur on a sample of 10% of inmates meeting above criteria, beginning the quarter after the CAP was implemented. Re-Audit to be done by CFMG monthly until 90% compliance is met. Monetary penalty to be decided between Sheriff and CFMG at contract renegotiation.

Juvenile Hall and Los Prietos Boys Camp

1. Did the Contractor conduct a comprehensive Health Assessment on each youth detainee as soon as possible and no later than 96 hours from booking?
2. Where medication cannot be verified, did the RN confer with the medical provider on site or on call to establish, document, and initiate a treatment plan and did this occur within 24 hours of the detainee's arrival at the juvenile hall reception area?
3. Did the contractor bring youth's immunizations up to date within 2 weeks or were the attempts to do so properly documented?