FOR IMMEDIATE RELEASE
February 14, 2019

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California Correctional Health Care Services Honored for System That Reduced Hospitalizations

ELK GROVE, CA - California Correctional Health Care Services (CCHCS) received the HIMSS Davies Award of Excellence for Implementing an Automated Clinical Risk Classification System, which reduced potentially avoidable hospitalizations by nearly 30 percent from June 2015 through December 2017 and saved more than $2 million in the first three years of its implementation.

Representatives were onsite at the HIMSS Global Conference & Exhibition this week to receive the recognition.

"Quality patient care is the principal function of any health care organization, regardless of the patient population," said J. Clark Kelso, Receiver over medical care for the California prison system. "Incorporating information technology solutions to leverage health care data is imperative to make informed decisions and improve organizational performance. CCHCS is honored to be recognized by HIMSS as deserving of this prestigious Davies Program award."

The project to create an automated risk classification system began more than 10 years ago when CCHCS was buried in paper, relied on person-dependent processes, and health care risks were not appropriately considered in housing placement. In 2009 CCHCS launched the first version of a risk classification system, which established health care factors to be considered when housing justice-involved individuals and introduced the concept of a "basic" versus "intermediate" care institution. While this was a step in the right direction, the person-dependent, paper process left risk levels too broadly defined and was not often accurate or up-to-date. To further improve the system, CCHCS set out to leverage available data sources and information technologies to automate the clinical rules for a risk stratification system. This system would provide timely, actionable information for those involved in the process of housing patients and provide near real-time performance reports to track progress, with the goal of improving placement of clinically high-risk patients.

As a result, CCHCS was able to improve appropriate placement of high-risk patients by nearly 20 percent, which led to improved accuracy of reported risk for individual patients, improved consistency in assigned risk between similar patients, and improved transparency of a patient's risk factor determinants - all while eliminating paper forms and person-dependency.

The organization was able to achieve a reduction in potentially avoidable hospitalizations for high-risk patients from 70.9 per 1,000 patients in June 2015 to 43.5 per 1,000 patients in December 2017. Administratively, the Automated Clinical Risk Classification System has saved

more than $2 million in the first three years of its implementation by eliminating the need for licensed clinicians to complete paper records.

"The California Department of Corrections and Rehabilitation is committed to continuous improvement of our correctional system, including providing constitutionally adequate health care to our population," said Ralph Diaz, CDCR Secretary (A). "Our staff work together each and every day to ensure we are doing what is right and what will help rehabilitate our population with hopes they will be able to return to their communities successfully. We are honored to receive this award, which demonstrates the dedication and team work of the department."