

## **SPECIFICATIONS OF USE**

## Information to be shared:

The minimum necessary health information shall be exchanged by both parties to ensure continuity of care. Department of Corrections and Rehabilitation (CDCR) to Lake County shall include information such as:

## **Medical Information:**

- TB Chrono
- Health and Physical
- Health Information Summary

#### **Substance-use Disorder Treatment Information:**

Substance Use Disorder records

## **Mental Health Information:**

- Mental Health Evaluation (CDCR Form 7386)
- Mental Health Summary (CDCR Form 7387)
- Mental Health Treatment Plan (CDCR Form 7388)
- Brief Mental Health Evaluation (CDCR Form 7389)
- Abnormal Involuntary Movement Scale Examination for Tardive Dyskinesia (CDCR Form 7390)
- Suicide Risk Evaluation (CDCR Form 7447)

# **Dental Information:**

Dental information

The information contained in the data files to be provided to Lake County will be used by the county for identifying state Patient-inmates who are being released to the county for purposes of continuity of care/coordination of care and treatment as outlined in the aforementioned California Penal Code. This MOU is in effect for this purpose only.