

**OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**
of
CROSS CITY CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted August 7-8, 2013

CMA STAFF

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CAP Assessment of Cross City Correctional Institution

I. Overview

On August 7-8, 2013, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Cross City Correctional Institution (CROCI). The survey report was distributed on August 27, 2013. On January 21, 2014, CMA staff conducted an off-site CAP assessment to evaluate the effectiveness of corrective actions taken by institutional staff to address the findings of the August 2013 survey. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that four of the five physical health findings were corrected. One physical health finding will remain open due to lack of demonstrated compliance.

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC RECORD REVIEW</u></p> <p>PH-1: A comprehensive review of 10 inmate records revealed the following deficiencies:</p> <p>(a) In 2 records, the baseline history was incomplete or missing.</p> <p>(b) In 3 records, there was no evidence of appropriate physical examination to include an assessment of the feet.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-1(a) & (b).</p>

Finding	CAP Evaluation Outcome
<p><u>ONCOLOGY CLINIC RECORD REVIEW</u></p> <p>PH-2: A comprehensive review of 3 inmate records revealed the following deficiencies:</p> <p>(a) In 1 record, the diagnosis was not appropriately documented.</p> <p>(b) In 1 record, the baseline history was incomplete or missing.</p>	<p>PH-2(a) CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-2(a).</p> <p>PH-2(b) OPEN</p> <p>Adequate evidence of in-service training was provided, however, a review of the documentation provided indicated that an acceptable level of compliance had</p>

Finding	CAP Evaluation Outcome
<p>(c) In 1 record, there was no evidence of initial and ongoing education regarding treatment compliance and smoking cessation.</p> <p>(d) In 1 record, the evaluation of the control of the disease and/or patient status was not documented.</p>	<p>not been reached.</p> <p>PH-2(c) CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-2(c).</p> <p>PH-2(d) CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-2(d).</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS RECORD REVIEW</u></p> <p>PH-3: In 1 of 3 applicable records (14 reviewed), the new diagnosis was not reflected on the problem list.</p>	<p>PH-3 CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>INTRA-SYSTEM TRANSFERS RECORD REVIEW</u></p> <p>PH-4: A comprehensive review of 5 inmate records revealed the following deficiencies:</p> <p>(a) In 1 record, the receiving institution did not include all necessary key information on the Health Information Transfer/Arrival Summary (DC4-760A).</p> <p>(b) In 2 records, a clinician did not review the health record within seven days of arrival.</p>	<p>PH-4 CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-4(a) & (b).</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICATION ADMINISTRATION RECORD REVIEW</u></p> <p>PH-5: A comprehensive review of 12 inmate records revealed the following deficiencies:</p> <p>(a) In 3 records, there was no documentation regarding the route of administration and/or the strength of the medication.</p> <p>(b) In 3 records, the medication orders were not transcribed within the necessary time frame.</p>	<p>PH-5 CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close PH-5(a) & (b).</p>

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that one of two mental health findings were corrected. One mental health finding will remain open due to insufficient monitoring.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS) RECORD REVIEW</u></p> <p>MH-1: A comprehensive review of 7 SHOS admissions revealed the following deficiencies:</p> <p>(a) In 2 records, admission orders were not signed/countersigned and/or not dated/timed.</p> <p>(b) In 1 of 2 applicable records, there was no evidence an evaluation was conducted to determine if crisis stabilization care was needed.</p> <p>(c) In 6 records, daily rounds by the clinician were not documented.</p>	<p>MH-1(a) CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close MH-1(a).</p> <p>MH-1(b) OPEN</p> <p>Adequate evidence of in-service training was provided, however, no evidence was provided that indicated the finding was appropriately monitored or that accepted levels of compliance had been reached.</p> <p>MH-1(c) CLOSED</p> <p>Adequate evidence of in-service</p>

Finding	CAP Evaluation Outcome
(d) In 2 records, entries were not dated, timed, signed and/or stamped.	<p>training and monitoring efforts were provided to close MH-1(c).</p> <p>MH-1(d) CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close MH-1(d).</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES RECORD REVIEW</u></p> <p>MH-2: In 4 of 10 applicable records (13 reviewed), evidence that nursing staff oriented inmates to mental health services within 24 hours of arrival at the institution was not present in the medical record.</p>	<p>MH-2 CLOSED</p> <p>Adequate evidence of in-service training and monitoring efforts were provided to close MH-2.</p>

IV. Conclusion

PH-2(b) remains open and all other physical health portions will close. MH-1(b) will remain open and all other mental health portions will close. Until such time as appropriate corrective actions are undertaken by CROCI staff and the results of those corrections reviewed by the CMA, this CAP will remain open. As some of the necessary steps to correct findings require further institutional monitoring, closure may take as long as three months. Follow-up assessment by the CMA will most likely take place through an off-site visit, but the option remains open to conduct an on-site evaluation.