

**SECOND ON-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**SANTA ROSA CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted September 25-26, 2013

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## CAP Assessment of Santa Rosa Correctional Institution

### I. Overview

On September 25-26, 2013, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Santa Rosa Correctional Institution (SARCI). The survey report was distributed on October 21, 2013. In December of 2013, SARCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the September 2013 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than ninety days. On April 30 - May 1, 2014, CMA staff conducted an on-site CAP assessment to evaluate the effectiveness of corrective actions taken by institutional staff to address the findings of the September 2013 survey. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 10 of 10 physical health findings and 5 of 9 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 32 of 38 physical health findings and 10 of 19 mental health findings were corrected on the Annex. On October 9, 2014 CMA staff conducted a second on-site CAP assessment to evaluate the effectiveness of corrective actions taken by institutional staff to address the remaining findings. 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

#### A. Main Unit

All physical health findings were closed during the first on-site CAP assessment.

#### B. Annex

The CAP closure files revealed sufficient evidence to determine that 6 of the 6 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<p><b><u>GASTROINTESTINAL CLINIC RECORD REVIEW</u></b></p> <p><b>PH-3(c): In 10 of 13 applicable records (14 reviewed), hepatitis A &amp; B vaccine was not given to inmates with hepatitis C infection and no prior history of A &amp; B infection.</b></p>	<p><b>PH-3(c) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3(c).</p>

Finding	CAP Evaluation Outcome
<p><b><u>IMMUNITY CLINIC RECORD REVIEW</u></b></p> <p><b>PH-4: A comprehensive review of 8 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In all records, the baseline history was incomplete or missing.</b></p> <p><b>(b) In all records, the baseline physical examination was incomplete or missing.</b></p> <p><b>(c) In all records, the baseline laboratory work was incomplete or missing.</b></p>	<p><b>PH-4(a) – (c) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4(a)-(c).</p>

Finding	CAP Evaluation Outcome
<p><b><u>RESPIRATORY CLINIC RECORD REVIEW</u></b></p> <p><b>PH-6(a): In 9 of 16 records reviewed, the baseline history was incomplete or missing.</b></p>	<p><b>PH-6(a) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6(a).</p>

Finding	CAP Evaluation Outcome
<p><b><u>CONSULTATIONS RECORD REVIEW</u></b></p> <p><b>PH-9: In 3 of 6 applicable records (13 reviewed), the new diagnosis was not reflected on the problem list.</b></p>	<p><b>PH-9 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9.</p>

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed evidence to determine that 4 of 4 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><b><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></b></p> <p><b>MH-1: A comprehensive review of 7 Self Harm Observation Status (SHOS) admissions revealed the following deficiencies:</b></p> <p><b>(a) In 1 of 1 applicable record, there was no evidence guidelines for SHOS management were observed.</b></p> <p><b>(b) In 5 records, there was no evidence daily rounds were conducted by the attending clinician.</b></p> <p><b>(c) In 2 records, there was no evidence of daily counseling by mental health staff.</b></p>	<p><b>MH-1(a) – (c) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1(a)-(c).</p>

Finding	CAP Evaluation Outcome
<p><b><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></b></p> <p><b>MH-2(a): In 3 of 11 applicable records (15 reviewed), initial lab tests were not completed as required.</b></p>	<p><b>MH-2(a) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2(a).</p>

**B. Annex**

The CAP closure files revealed evidence to determine that 6 of 9 mental health findings were corrected. Three mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><b><u>SELF-HARM OBSERVATION STATUS</u></b></p> <p><b>MH-1(c): In 4 of 10 records reviewed, the documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</b></p>	<p><b>MH-1(c) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of</p>

Finding	CAP Evaluation Outcome
	compliance had not been reached. MH-1(c) will remain open.

Finding	CAP Evaluation Outcome
<p><b><u>MENTAL HEALTH RESTRAINTS</u></b></p> <p><b>MH-2: A comprehensive review of 6 mental health restraint episodes revealed the following deficiencies:</b></p> <p><b>(b) In 3 of 5 applicable records, there was no documentation that the inmate was offered fluids and/or bedpan/urinal every two hours.</b></p> <p><b>(c) In 3 records, there was no documentation that the inmate's respiration and/or circulation were checked every 15 minutes.</b></p> <p><b>(e) In 2 of 5 applicable records, there was no documentation that the inmate's limbs were exercised every two hours.</b></p>	<p><b>MH-2(b), (c), &amp; (e) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2(b), (c), &amp; (e).</p>

Finding	CAP Evaluation Outcome
<p><b><u>USE OF FORCE RECORD REVIEW</u></b></p> <p><b>MH-3: In 1 of 3 records reviewed, there was no indication that mental health staff interviewed the inmate the next working day to determine the level of mental health care needed.</b></p>	<p><b>MH-3 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. MH-3 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><b><u>SPECIAL HOUSING RECORD REVIEW</u></b></p> <p><b>MH-4: In 1 of 5 applicable records (8 reviewed), follow up mental status examinations (MSE) were not in the medical record or not completed within the required time frame.</b></p>	<p><b>MH-4 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-4.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INPATIENT PSYCHIATRIC MEDICATIONS RECORD REVIEW</u></b></p> <p><b>MH-5: A comprehensive review of 17 inpatient records revealed the following deficiencies:</b></p> <p><b>(b) In 6 records, the physician's orders were not dated and timed.</b></p> <p><b>(c) In 2 of 10 applicable records, follow-up lab tests were not completed as required.</b></p>	<p><b>MH-5(b) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. MH-5(b) will remain open.</p> <p><b>MH-5(c) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5(c).</p>

Finding	CAP Evaluation Outcome
<p><b><u>INPATIENT MENTAL HEALTH SERVICES RECORD REVIEW</u></b></p> <p><b>MH-6: In all of the records (16 reviewed), the required hours of therapeutic services were not documented.</b></p>	<p><b>MH-6 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-6.</p>

#### **IV. Conclusion**

##### **Physical Health-Main Unit**

All physical health portions closed during the first on-site CAP assessment.

##### **Physical Health-Annex**

All physical health findings will close.

##### **Mental Health-Main Unit**

All mental health findings will close.

##### **Mental Health-Annex**

MH-2(b), (c), & (e), MH-4, MH-5(c), and MH-6 will close and all other mental health findings will remain open

Until such time as appropriate corrective actions are undertaken by SARCI 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 evaluation.