

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

of

TAYLOR CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted January 15-16, 2014

CMA STAFF

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CAP Assessment Distributed on September 22, 2015

CAP Assessment of Taylor Correctional Institution

I. Overview

On January 15-16, 2014, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Taylor Correctional Institution (TAYCI). The survey report was distributed on February 17, 2014. In April of 2014, TAYCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the January 2014 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 July 1, 2014, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, CMA staff conducted an on-site CAP assessment on July 23-24, 2014 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 17 of 49 physical health findings and 4 of 27 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 22 of 45 physical health findings and 10 of 22 mental health findings were corrected on the Annex.

In November of 2014, CMA staff again requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, CMA staff conducted an on-site CAP assessment on December 18, 2014 to evaluate the effectiveness of corrective actions taken by institutional staff to address the remaining findings. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 23 of 32 physical health findings and 15 of 23 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 23 of 23 physical health findings and 11 of 12 mental health findings were corrected on the Annex.

In April of 2015, CMA staff again requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents reviewed, the CMA conducted an on-site CAP assessment on May 15, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 7 of 9 physical health findings and 8 of 8 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 1 of 1 mental health findings were corrected on the Annex.

In September of 2015, CMA staff again requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an on-site assessment on September 22, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. 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

The CAP closure files revealed sufficient evidence to determine that 2 of 2 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS RECORD REVIEW</u></p> <p>PH-11(b): In 3 of 14 applicable records (15 reviewed), there was no evidence that the consultation and/or follow-up appointments were initiated and completed in a timely manner.</p>	<p>PH-11(b) CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11(b).</p>

Finding	CAP Evaluation Outcome
<p><u>PERIODIC SCREENING RECORD REVIEW</u></p> <p>PH-13(c): In 12 of 15 records reviewed, there was no evidence that required diagnostic tests were performed 7-14 days prior to the periodic screening encounter.</p>	<p>PH-13(c) CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-13(c).</p>

B. Annex

All physical health findings are closed.

III. Mental Health Assessment Summary

A. Main Unit

All mental health findings are closed.

B. Annex

All mental health findings are closed.

IV. Conclusion

All physical and mental health findings are closed. All outstanding issues related to the CMA survey of TAYCI are adequately resolved and no further action is required.