

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

of

CHARLOTTE CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted April 1 - 2, 2015

CMA STAFF

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CAP Assessment of Charlotte Correctional Institution

I. Overview

On April 1-2, 2015, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Charlotte Correctional Institution (CHARCI). The survey report was distributed on April 27, 2015. In May 2015, CHARCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the April 2015 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 October 7, 2015, 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 October 27 & 28, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 8 of 9 physical health findings and 23 of 31 mental health findings were corrected.

On January 25, 2016, 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 off-site assessment on January 29, 2016 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

The CAP closure files revealed sufficient evidence to determine that 1 of 1 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<u>INSTITUTIONAL TOUR</u> PH-8: Over-the-counter medication counts in the dorms did not match the number indicated on the logs.	PH-8 CLOSED Adequate documentation of correction was provided to close PH-8.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 8 of 8 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>MH-1: In 6 of 15 records reviewed, the documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p>	<p>MH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>INPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>MH-12: In 2 of 5 applicable records (17 reviewed), there was no evidence the nurse met with inmates who refused medication for 2 consecutive days.</p>	<p>MH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-12.</p>

Finding	CAP Evaluation Outcome
<p><u>INPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 16 inpatient records revealed the following deficiencies:</p> <p>MH-14: In 3 of 13 applicable records, vital signs were not taken daily for 5 days for new admissions.</p> <p>MH-17: In 5 records, the required hours of planned structured therapeutic services were not provided.</p> <p>MH-20: In 16 records, behavioral level assessments were missing or not reviewed within required the time frame.</p>	<p>MH-14, MH-17, & MH-20 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-14, MH-17, & MH-20.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 18 outpatient records revealed the following deficiencies:</p> <p>MH-25: In 4 records, the Individual Service Plan (ISP) problem descriptions did not include specific baseline data on frequency and/or intensity of mental health symptoms.</p> <p>MH-27: In 6 records, there was no documentation that the inmate received the services listed in the ISP.</p>	<p>MH-25 & MH-27 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-25 & MH-27.</p>

Finding	CAP Evaluation Outcome
<p><u>MENTAL HEALTH SYSTEMS</u></p> <p>MH-31: Paint was peeling from the walls of Isolation Management Rooms (IMR) in C-Dorm.</p>	<p>MH-31 CLOSED</p> <p>Adequate evidence of correction was provided to close MH-31.</p>

IV. Conclusion

All physical and mental health findings are closed, and all outstanding issues related to the CMA survey of CHARCI are adequately resolved. No further action is required.