

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

of

MARION CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted July 8-9, 2014

CMA STAFF

Jane Holmes-Cain, LCSW
Lynne Babchuck, LCSW

CAP Assessment Distributed on April 23, 2015

CAP Assessment of Marion Correctional Institution

I. Overview

On July 8-9, 2014, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Marion Correctional Institution (MARCI). The survey report was distributed on July 28, 2014. In August and September of 2014, MARCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the July 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 November 25, 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 December 16, 2014 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 22 of the 31 physical health findings and 4 of 5 mental health findings were corrected. On March 10, 2015 CMA again requested accessing to monitoring documents. Based on the documents reviewed, an on-site CAP assessment was conducted on April 15, 2015. 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 9 of the 9 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>CARDIOVASCULAR CLINIC</u></p> <p>A comprehensive review of 18 inmate records revealed the following deficiencies:</p> <p>PH-3: In 4 of 13 applicable records, there was no evidence that inmates with known ASCVD were prescribed low dose aspirin.</p> <p>PH-4: In 10 records, there was no evidence of pneumococcal vaccine or refusal.</p>	<p>PH-3 & PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3 & PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC</u></p> <p>A comprehensive review of 15 inmate records revealed the following deficiencies:</p> <p>PH-6: In 9 records, the baseline information was incomplete or missing.</p> <p>PH-8: In 9 of 13 applicable records, there was no evidence of an annual fundoscopic examination.</p>	<p>PH-6 & PH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6 & PH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>PH-10: In 9 of 15 records reviewed, there was no evidence of hepatitis A & B vaccine given to inmates with hepatitis C infection and no prior history of A & B infection.</p>	<p>PH-10 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10.</p>

Finding	CAP Evaluation Outcome
<p><u>MISCELLANEOUS CLINIC</u></p> <p>PH-11: In 4 of 6 records reviewed, the baseline information was incomplete or missing.</p>	<p>PH-11 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11.</p>

Finding	CAP Evaluation Outcome
<p><u>OTHER CHRONIC ILLNESS CLINIC</u></p> <p>PH-21: A comprehensive review of inmate records revealed the following deficiencies:</p> <p>The yearly data was missing on the DC4-770 “Chronic Illness Clinic Flowsheets” in the cardiovascular, endocrine, neurology, and oncology clinics.</p> <ul style="list-style-type: none"> • In 16 of 18 cardiovascular records, the DC4-770 was not complete. • In 3 of 15 endocrine records, the DC4-770 was not complete. • In 5 of 11 neurology records, the DC4-770 was not complete. • In 2 of 4 oncology records, the DC4-770 was not complete. 	<p>PH-21 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-21.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>A comprehensive review of 15 inmate records revealed the following deficiencies:</p> <p>PH-28: In 10 of 12 applicable records, the new diagnosis was not reflected on the problem list.</p> <p>PH-29: In 2 of 8 applicable records, there was no evidence the consultant’s treatment recommendations were incorporated into the treatment plan.</p>	<p>PH-28 & PH-29 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-28 & PH-29.</p>

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that the remaining mental health finding was corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>INMATE REQUESTS</u></p> <p>MH-3: In 3 of 6 applicable records (12 reviewed), an interview or referral was indicated in the inmate request response but had not occurred as intended.</p>	<p>MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-3.</p>

IV. Conclusion

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