

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

of

WAKULLA CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted December 10 – 11, 2014

CMA STAFF

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CAP Assessment of Wakulla Correctional Institution

I. Overview

On December 10 - 11, 2014, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Wakulla Correctional Institution (WAKCI). The survey report was distributed on January 6, 2015. In February of 2015, WAKCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the December 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. In May 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 May 28 - 29, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 19 of 27 physical health findings and 11 of 16 mental health findings were corrected. Additionally, 27 of 30 physical health findings and 9 of 11 mental health findings were corrected on the Annex.

In September 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, an on-site assessment was conducted on September 25, 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

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that five of the eight physical health findings were corrected. Three physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC</u></p> <p>PH-2: In 12 of 13 records reviewed, the physical examination was incomplete.</p>	<p>PH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>A comprehensive review of 13 inmate records revealed the following deficiencies:</p> <p>PH-7: In 6 records, the physical examination was incomplete.</p> <p>PH-8: In 3 of 9 applicable records, there was no evidence that hepatitis A & B vaccine were given to inmates with hepatitis C infection and no prior history of A & B infection.</p> <p>PH-9: In 2 of 8 applicable records, there was no evidence of pneumococcal vaccine or refusal.</p>	<p>PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-7.</p> <p>PH-8 & PH-9 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been reached. PH-8 & PH-9 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>IMMUNITY CLINIC</u></p> <p>PH-10: In 8 of 10 records reviewed, there was no evidence of hepatitis B vaccine or refusal.</p>	<p>PH-10 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been reached. PH-10 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>TUBERCULOSIS CLINIC</u></p> <p>PH-20: In 3 of 4 records reviewed, there was no evidence of monthly nursing follow-up.</p>	<p>PH-20 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-20.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>PH-25: In 6 of 11 records reviewed, the diagnosis was not recorded on the problem list.</p>	<p>PH-25 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-25.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS</u></p> <p>PH-26: A tour of the dental clinic revealed that necessary equipment was not in proper working order.</p>	<p>PH-26 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-26.</p>

B. Annex

The CAP closure files revealed sufficient evidence to determine that two of the three physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>PH-7: In 9 of 14 records reviewed, there was no evidence that hepatitis A & B vaccinations were given to inmates with hepatitis C and no prior history of A & B infection.</p>	<p>PH-7 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been reached. PH-7 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>IMMUNITY CLINIC</u></p> <p>PH-10: In 4 of 11 applicable records (14 reviewed) there was no evidence of hepatitis B vaccination or refusal.</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>ONCOLOGY CLINIC</u></p> <p>PH-16: In 1 of 3 records reviewed, there was no evidence of a complete and/or appropriate physical evaluation.</p>	<p>PH-16 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-16.</p>

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that three of five mental health findings were corrected. Two mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 10 SHOS admissions revealed the following deficiencies:</p> <p>MH-4: In 2 records, the DC4-732 “Infirmary/Hospital Admission Nursing Evaluation” was not completed within 2 hours of an SHOS admission</p>	<p>MH-4 & MH-7 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been reached. MH-4 & MH-7 will remain open.</p>

Finding	CAP Evaluation Outcome
<p>MH-7: In 4 records, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p> <p>MH-9: In 2 records, daily counseling by mental health staff did not occur.</p>	<p>MH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-9.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 14 outpatient records revealed the following deficiencies:</p> <p>MH-13: In 8 of 8 applicable records, the mental health screening evaluation was not completed within 14 days of arrival.</p> <p>MH-16: In 7 records, mental health problems were not recorded on the problem list.</p>	<p>MH-13 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-13.</p> <p>MH-16 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-16.</p>

A. Annex

The CAP closure files revealed evidence to determine that two of two mental health findings were corrected. All mental health findings will close.

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>MH-3: In 1 of 2 applicable records (17 reviewed), there was no evidence the nurse met with inmates who refused medication for 2 consecutive days.</p>	<p>MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>MH-9: In 5 of 13 records (16 reviewed), the ISP was not revised within 180 days.</p>	<p>MH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-9.</p>

IV. Conclusion

Physical Health-Main Unit

Three physical health findings will remain open, and all other physical health findings will close.

Physical Health-Annex

One physical health finding will remain open, and all other physical health findings will close.

Mental Health-Main Unit

Two mental health findings will remain open, and all other mental health findings will close.

Mental Health-Annex

All mental health findings will close.

Until such time as appropriate corrective actions are undertaken by WAKCI 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 on-site evaluation.