THIRD OFF-SITE CORRECTIVE ACTION PLAN ASSESSMENT

of

SANTA ROSA CORRECTIONAL INSTITUTION

for the

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

CMA STAFF

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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 onsite 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. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 4 of 4 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 6 of 6 physical health findings and 6 of 9 mental health findings were corrected on the Annex. On February 9, 2015 the CMA conducted an off-site 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

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

III. Mental Health Assessment Summary

A. Main Unit

All mental health findings were closed during the second on-site CAP assessment.

B. Annex

The CAP closure files revealed evidence to determine that 2 of 3 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
SELF-HARM OBSERVATION STATUS	MH-1(c) CLOSED
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.	Adequate evidence of in-service training and documentation of correction were provided to close MH-1(c).

Finding	CAP Evaluation Outcome
USE OF FORCE RECORD REVIEW	MH-3 CLOSED
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.	Adequate evidence of in-service training and documentation of correction were provided to close MH-3.

Finding	CAP Evaluation Outcome
INPATIENT PSYCHIATRIC MEDICATIONS RECORD REVIEW MH-5(b): In 6 of 17 inpatient records reviewed, the physician's orders were not signed, dated, and/or timed.	MH-5(b) OPEN Adequate evidence of in-service training was provided; however after review of the documentation provided from the medical record, it was determined that an acceptable level of compliance had not been reached. MH-5(b) will remain open.

IV. Conclusion

Physical Health-Main Unit All physical health portions are closed.

Physical Health-Annex
All physical health portions are closed

Mental Health-Main Unit

All mental health portions are closed.

Mental Health-Annex

MH-1(c) and MH-3 will close and MH-5(b) 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.