

**ON-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

WAKULLA CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted April 10-12, 2018

CMA STAFF

Monica Dodrill, RN
Kathryn McLaughlin, BS
Mary Jane Wynn, LCSW

CAP Assessment Distributed on December 3, 2018

CAP Assessment of Wakulla Correctional Institution

I. Overview

On April 10-12, 2018, 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 May 7, 2018. In June 2018, 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 WAKCI 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 September 25, 2018, 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, the CMA conducted an on-site CAP assessment on November 28-29, 2018 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 21 of the 27 physical health findings were corrected. Six physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>CHRONIC ILLNESS CLINIC RECORD REVIEW</u></p> <p>PH-1: In 9 of 18 records reviewed, baseline information was incomplete or missing.</p>	<p>PH-1 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-1 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC RECORD REVIEW</u></p> <p>A comprehensive review of 16 records revealed the following deficiencies:</p> <p>PH-2: In 6 records, there was no evidence that the control of the disease was evaluated at the CIC.</p> <p>PH-3: In 1 of 5 applicable records, inmates with HgbA1c over 8.0 were not seen every three months as required.</p>	<p>PH-2 & PH-3 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-2 & PH-3 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC RECORD REVIEW</u></p> <p>PH-4: In 3 of 10 applicable records (11 reviewed), there was no evidence of hepatitis A and/or B vaccination or refusal.</p>	<p>PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>IMMUNITY CLINIC RECORD REVIEW</u></p> <p>PH-5: In 1 of 1 applicable records (12 reviewed), there was no evidence of hepatitis B vaccination or refusal.</p>	<p>PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>MISCELLANEOUS CLINIC RECORD REVIEW</u></p> <p>A comprehensive review of 15 records revealed the following deficiencies:</p> <p>PH-6: In 6 records, there was no evidence that the control of the disease was evaluated at the CIC visit.</p> <p>PH-7: In 1 of 1 applicable records, there was no evidence of a referral to a specialist when indicated.</p>	<p>PH-6 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-6 will remain open.</p> <p>PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC RECORD REVIEW</u></p> <p>A comprehensive review of 10 records revealed the following deficiencies:</p> <p>PH-8: In 7 records, there was evidence that seizures were classified as primary generalized (tonic-clonic, grand mal), primary or simple absence (petit mal), simple partial seizures, or complex partial seizures.</p> <p>PH-9: In 4 records, there was no evidence that the control of the disease was evaluated at the CIC visit.</p>	<p>PH-8 & PH-9 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-8 & PH-9 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>SICK CALL RECORD REVIEW</u></p> <p>PH-10: In 2 of 7 applicable records (18 reviewed), there was no evidence that the follow-up visit was completed timely.</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>INFIRMARY RECORD REVIEW</u></p> <p>A comprehensive review of 13 records revealed the following deficiencies:</p> <p>PH-11: In 3 of 6 applicable inpatient records, there was no evidence of a discharge note.</p> <p>PH-12: In 1 of 2 applicable records, outpatient weekend and holiday phone rounds were not documented.</p> <p>PH-13: In 2 of 10 applicable records, nursing evaluations were not documented at least every eight hours for inmates on 23-hour observation status.</p> <p>PH-14: In 2 of 6 applicable records, inpatient weekend and holiday phone rounds were not documented.</p>	<p>PH-11, PH-12, PH-13, & PH-14 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11, PH-12, PH-13, & PH-14.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS RECORD REVIEW</u></p> <p>PH-15: In 3 of 11 records reviewed, the diagnosis was not recorded on the problem list.</p>	<p>PH-15 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-15.</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICATION ADMINISTRATION RECORD REVIEW</u></p> <p>PH-16: In 3 of 12 records reviewed, there was no evidence that the Medication Administration Record (MAR) matched the physician's order.</p>	<p>PH-16 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-16.</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICAL INMATE REQUESTS RECORD REVIEW</u></p> <p>A comprehensive review of 18 records revealed the following deficiencies:</p> <p>PH-17: In 8 records, the inmate request was not responded to in an appropriate time frame.</p> <p>PH-18: In 5 records, the response to the intended request was not direct, specific, and/or did not address the stated need.</p>	<p>PH-17 & PH-18 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-17 & PH-18.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS REVIEW</u></p> <p>PH-19: There was no evidence American Heart Association prophylactic regimens were available in the dental unit.</p> <p>PH-20: Medications were dispensed inadequately.</p> <p>PH-21: There was no evidence that all necessary equipment was available.</p>	<p>PH-19, PH-20, & PH-21 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-19, PH-20, & PH-21.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL CARE RECORD REVIEW</u></p> <p>A comprehensive review of 18 records revealed the following deficiencies:</p> <p>PH-22: In 4 records, there was no evidence initial dental appointments were completed in a timely manner.</p> <p>PH-23: In 3 of 5 applicable records, there was no evidence follow-up appointments were completed timely.</p> <p>PH-24: In 2 of 6 applicable records, there was no evidence inmates were referred for consultation or specialty services appropriately and/or services were not performed in a timely manner.</p>	<p>PH-22, PH-23, & PH-24 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-22, PH-23, & PH-24.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>PH-25: Over the counter medications were not available in the dorms.</p> <p>PH-26: There was no evidence first aid kits were inspected monthly.</p>	<p>PH-25 & PH-26 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-25 & PH-26.</p>

Finding	CAP Evaluation Outcome
<p><u>ADDITIONAL ADMINISTRATIVE ISSUE</u></p> <p>PH-27: KOP medications were not refilled in a timely manner.</p>	<p>PH-27 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-27.</p>

B. Annex Unit

The CAP closure files revealed sufficient evidence to determine that 10 of 13 of the physical health findings were corrected. Three physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC RECORD REVIEW</u></p> <p>PH-1: In 2 of 9 applicable records (11 reviewed), there was no evidence of pneumococcal vaccination or refusal.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>ONCOLOGY CLINIC RECORD REVIEW</u></p> <p>PH-2: In 1 of 2 records reviewed, there was no evidence of control of the disease and/or status of the patient.</p>	<p>PH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-2 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>RESPIRATORY CLINIC RECORD REVIEW</u></p> <p>PH-3: In 2 of 3 applicable records (12 reviewed), there was no evidence that inmates with moderate to severe reactive airway disease were started on anti-inflammatory medications.</p>	<p>PH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>EMERGENCY CARE RECORD REVIEW</u></p> <p>PH-4: In 4 of 17 records reviewed, there was no evidence of complete vital signs.</p>	<p>PH-4 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-4 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS RECORD REVIEW</u></p> <p>A comprehensive review of 9 records revealed the following deficiencies:</p> <p>PH-5: In 4 records, the diagnosis was not recorded on the problem list.</p> <p>PH-6: In 4 of 7 applicable records, the consultation log was not complete and/or accurate for the incident.</p>	<p>PH-5 & PH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5 & PH-6.</p>

Finding	CAP Evaluation Outcome
<p><u>INTRA-SYSTEM TRANSFERS RECORD REVIEW</u></p> <p>PH-7: In 5 of 16 records reviewed, the “Health Information Transfer Arrival Summary” (DC4-760A) was incomplete.</p>	<p>PH-7 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-7 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>PERIODIC SCREENINGS RECORD REVIEW</u></p> <p>PH-8: In 2 of 9 records reviewed, there was no evidence that inmates were provided lab results at the time of the screening.</p>	<p>PH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS REVIEW</u></p> <p>PH-9: There was no evidence that the autoclave was tested appropriately.</p> <p>PH-10: There was no evidence that prosthetic devices coming from the lab were appropriately disinfected.</p>	<p>PH-9 & PH-10 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9 & PH-10.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL CLINIC RECORD REVIEW</u></p> <p>A comprehensive review of 18 records revealed the following deficiencies:</p> <p>PH-11: In 4 records, there was no evidence of an accurate diagnosis based on a complete dental examination.</p> <p>PH-12: In 5 records, there was no evidence of complete and accurate charting of dental findings.</p>	<p>PH-11 & PH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11 & PH-12.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>PH-13: Over the counter medications were not readily available and/or logged correctly.</p>	<p>PH-13 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-13.</p>

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed evidence to determine that 5 of 6 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 6 records revealed the following deficiencies:</p> <p>MH-1: In 4 records, SHOS orders were not co-signed by the next working day.</p> <p>MH-2: In 3 records, documentation did not indicate the inmate was observed at the frequency ordered by the physician.</p> <p>MH-3: In 2 records, mental health staff did not provide post-discharge follow-up within 7 days.</p>	<p>MH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1.</p> <p>MH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-2 will remain open.</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>INMATE REQUESTS</u></p> <p>MH-4: In 5 of 15 records reviewed, the inmate request form was not present in the record.</p>	<p>MH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 11 records revealed the following deficiencies:</p> <p>MH-5: In 4 of 5 applicable records, the inmate was not seen by mental health staff within 14 days of arrival.</p> <p>MH-6: In 4 of 10 applicable records, the Individualized Service Plan (ISP) was not reviewed and revised within 180 days.</p>	<p>MH-5 & MH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5 and MH-6.</p>

B. Annex Unit

The CAP closure files revealed evidence to determine that 13 of 20 mental health findings were corrected. Seven mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>USE OF FORCE</u></p> <p>A comprehensive review of 10 records revealed the following deficiencies:</p> <p>MH-1: In 2 records, the post use-of-force physical examination was not present in the record.</p> <p>MH-2: In 2 of 9 applicable records, the nursing assessment was not completed in its entirety.</p> <p>MH-3: In 7 records, a written referral to mental health by physical health staff was not present.</p> <p>MH-4: In 8 of 9 applicable records, the inmate was not seen by mental health staff the next working day to determine if a higher level of care was needed.</p>	<p>MH-1, MH-2, MH-3 & MH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1, MH-2, MH-3 and MH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>INMATE REQUESTS</u></p> <p>MH-5: In 3 of 13 records reviewed, the inmate request form was not present in the record.</p>	<p>MH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>SPECIAL HOUSING</u></p> <p>MH-6: In 3 of 9 applicable records (18 reviewed), the mental status exam (MSE) was not completed within the specified time frame.</p>	<p>MH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-6.</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-7: In 1 of 4 applicable records, medications were not continued as ordered between the inmate's arrival and when first seen by psychiatry.</p> <p>MH-8: In 4 of 8 applicable records, the inmate was not interviewed by mental health staff within 14 days of arrival.</p> <p>MH-9: In 1 of 2 applicable records, the sex offender screening was not completed.</p> <p>MH-10: In 8 records, the Individualized Service Plan (ISP) was not signed by all relevant parties.</p> <p>MH-11: In 6 of 17 applicable records, the ISP was not reviewed or revised timely.</p> <p>MH-12: In 5 of 17 applicable records, the inmate did not receive mental health interventions and services as listed on the ISP.</p>	<p>MH-7 & MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-7 and MH-8.</p> <p>MH-9 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable records to review during the monitoring period. MH-9 will remain open.</p> <p>MH-10 & MH-11 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-10 and MH-11 will remain open.</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>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>A comprehensive review of 16 outpatient records revealed the following deficiencies:</p> <p>MH-13: In 3 of 7 applicable records, there was no evidence that abnormal lab results were addressed.</p> <p>MH-14: In 4 of 13 applicable records, the inmate did not receive medications as prescribed or documentation of refusal was not present in the medical record.</p> <p>MH-15: In 4 of 7 applicable records, nursing education was not provided after 2 consecutive days of medication refusals.</p> <p>MH-16: In 4 of 8 applicable records, a medication refusal form was not signed after 3 consecutive refusals or 5 in one month.</p> <p>MH-17: In 5 of 13 applicable records, the prescribed medication times were not clinically appropriate or did not provide rationale in the documentation.</p> <p>MH-18: In 7 records, follow-up psychiatric contacts were not conducted at appropriate intervals.</p> <p>MH-19: In 2 of 3 applicable records, Abnormal Involuntary Movement Scales (AIMS) were not administered within the appropriate time frame.</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-14, MH-15, MH-16 & MH-17 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-14, MH-15, MH-16 and MH-17 will remain open.</p> <p>MH-18 & MH-19 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-18 and MH-19.</p>

Finding	CAP Evaluation Outcome
<p><u>AFTERCARE PLANNING</u></p> <p>MH-20: In 2 of 2 applicable records (6 reviewed), the summary of outpatient mental health care was not completed within 30 days of expiration of sentence (EOS).</p>	<p>MH-20 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-20.</p>

IV. Conclusion

Physical Health-Main Unit

The following physical health findings will close: PH-4, PH-5, PH-7, PH-10, PH-11, PH-12, PH-13, PH-14, PH-15, PH-16, PH-17, PH-18, PH-19, PH-20, PH-21, PH-22, PH-23, PH-24, PH-25, PH-26, PH-27. All other physical health findings will remain open.

Physical Health-Annex Unit

The following physical health findings will close: PH-1, PH-3, PH-5, PH-6, PH-8, PH-9, PH-10, PH-11, PH-12, PH-13. All other physical health findings will remain open.

Mental Health-Main Unit

The following mental health findings will close: MH-1, MH-3, MH-4, MH-5, MH-6. All other mental health findings will remain open.

Mental Health-Annex Unit

The following mental health findings will close: MH-1, MH-2, MH-3, MH-4, MH-5, MH-6, MH-7, MH-8, MH-12, MH-13, MH-18, MH-19, MH-20. All other mental health findings will remain open.

Until 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.