

**CORRECTIVE ACTION PLAN
ASSESSMENT
of
AVON PARK CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey
Conducted February 7-9, 2023

CMA STAFF

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I. Overview

On February 7-9, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Avon Park Correctional Institution (AVPCI). The survey report was distributed on March 16, 2023. In April 2023, Avon Park CI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the Avon Park CI 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. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

Summary of CAP Assessments for Avon Park Correctional Institution

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	September 22, 2023	21	8	13

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 11 of the 18 physical health findings were corrected. Seven physical health findings remain open.

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
<u>Endocrine Clinic Chronic Illness Clinic</u> Screen 7: Inmates with HgbA1c over 8% are seen at least every 90 days		X			

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
Screen 9: Inmates with diabetes who are hypertensive or show evidence of (micro)albuminuria are placed on ACE/ARB therapy	X				
<u>Gastrointestinal Chronic Illness Clinic</u> Screen 7: There is evidence of hepatitis A and/or B vaccination for inmates with hepatitis C and no evidence of past infection	X				
Screen 13: Laboratory testing for inmates undergoing hepatitis treatment is completed at the required intervals			X		
<u>Oncology Chronic Illness Clinic</u> Screen 5: Abnormal labs are reviewed and addressed in a timely manner	X				
Screen 6: At each visit there is an evaluation of the control of the disease and the status of the patient	X				
<u>Emergency Services</u> Screen 9: Inmates returning from an outside hospital are evaluated by the clinician within one business day	X				

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
<u>Outpatient Infirmiry Care</u> Screen 7: A discharge note containing all of the required information is completed as required	X				
<u>Inpatient Infirmiry Care</u> Screen 2: All orders are received and implemented	X				
Screen 8: A discharge note containing all of the required information is completed as required		X			
Screen 9: A discharge summary is completed by the clinician within 72 hours of discharge	X				
<u>Confinement Medical Review</u> Screen 3: The inmate is seen in chronic illness clinic as regularly scheduled				X	
Screen 6: All sick call appointments are triaged and responded to within the required time frame	X				
Screen 7: New or pending consultations progress as clinically required		X			
<u>Intra-System Transfers</u> Screen 7: A clinician reviews the health record and DC4-760A within seven (7) days of arrival	X				

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
<p><u>Periodic Screenings</u> Screen 1: The periodic screening encounter is completed within one month of the due date</p>		X			
<p>Screen 2: All components of the screening are completed and documented as required</p>		X			
<p><u>Inmate Housing Areas</u> Screen 5: Procedures to assess medical and dental sick call are posted in a conspicuous place</p>	X				

III. Mental Health Assessment Summary

A. Main Unit

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

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
<p><u>Self-Injury and Suicide Prevention Review</u> Screen 4: The inmate is observed at the frequency ordered by the clinician</p>	X				
Screen 8: There is evidence of a face-to-face evaluation by the clinician prior to discharge		X			
<p><u>Mental Health Inmate Request</u> Screen 5: Consent for treatment is obtained prior to conducting an interview</p>	X				

IV. Conclusion

Until appropriate corrective actions are undertaken by Avon Park CI 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.