

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

of

BAY CORRECTIONAL FACILITY

for the

Physical and Mental Health Survey
Conducted August 16-18, 2016

CMA STAFF

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CAP Assessment Distributed on May 5, 2017

CAP Assessment of Bay Correctional Facility

I. Overview

On August 16-18, 2016, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Bay Correctional Facility (BAYCF). The survey report was distributed on September 1, 2016. In September 2016, BAYCF submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the August 2016 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 December 21, 2016, 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 January 26, 2017 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 10 of 11 physical health findings and 12 of 16 mental health findings were corrected.

On April 18, 2017, 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 off-site CAP assessment on May 4, 2017 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

The CAP closure files revealed sufficient evidence to determine that 1 of 1 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<u>NEUROLOGY CLINIC</u> PH-2: In 2 of 9 applicable records (11 reviewed), there was no evidence that abnormal labs were addressed appropriately or in a timely manner.	PH-2 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-2.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 4 of 4 mental health findings were corrected. All mental health findings are closed

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 9 Self-harm Observation Status (SHOS) admissions revealed the following deficiencies:</p> <p>MH-1: In 7 records, the admitting clinician's orders did not specify frequency of inmate observation while on SHOS.</p> <p>MH-6: In 9 records, rounds by the attending clinician were not completed daily.</p>	<p>MH-1 & MH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1 & MH-6.</p>

Finding	CAP Evaluation Outcome
<p><u>USE OF FORCE</u></p> <p>MH-8: In 3 of 4 records reviewed, the post use of force exam was not completed in its entirety</p>	<p>MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>MH-12: In 2 of 5 applicable records (18 reviewed), there was no evidence that abnormal lab results were addressed.</p>	<p>MH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-12.</p>

IV. Conclusion

All findings as a result of the September 2016 survey are closed and no further action is required on this CAP. The CMA appreciates the efforts to improve services and documentation at this institution and continues to encourage ongoing quality improvement activities to ensure that the proper provision of health care services is maintained.