

**FIRST CORRECTIVE ACTION PLAN  
ASSESSMENT  
of  
BLACKWATER CORRECTIONAL FACILITY**

for the

Physical and Mental Health Survey  
Conducted August 13-15, 2024

**CMA STAFF**

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**I. Overview**

On August 13-15, 2024, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Blackwater River Correctional Facility (BRCF). The survey report was distributed on October 3, 2024. In October 2024, BRCF submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the BRCF 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 Blackwater River Correctional Facility**

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	February 14, 2025	22	7	15

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 11 of the 13 physical health findings were corrected. Two 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
<b>Endocrine Clinic Chronic Illness Clinic:</b> <b>Screen 2:</b> There is evidence of an appropriate physical examination	X				
<b>Emergency Services:</b> <b>Screen 5:</b> Findings requiring clinician notification are made in accordance with protocols	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><b>Inpatient Infirmary Care:</b></u> <b>Screen 4:</b> A Morse Fall Scale is completed at the required intervals		X			
<u><b>Sick Call Services:</b></u> <b>Screen 6:</b> Referrals to a higher level of care are made in accordance with protocols	X				
<u><b>Confinement Medical Review:</b></u> <b>Screen 6:</b> All sick call appointments are triaged and responded to within the required time frame	X				
<u><b>Consultations:</b></u> <b>Screen 3:</b> The consultation is completed in a timely manner as dictated by the clinical needs of the inmate	X				
<u><b>Medication And Vaccination Administration:</b></u> <b>Screen 3:</b> If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance	X				
<u><b>Intra-System Transfers:</b></u> <b>Screen 4:</b> The medical record reflects continuity of care for inmate's pending consultations	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><b><u>Periodic Screenings:</u></b>  <b>Screen 2:</b> All components of the screening are completed and documented as required</p>	X				
<p><b>Screen 3:</b> All diagnostic tests are completed prior to the periodic screening encounter</p>	X				
<p><b>Screen 5:</b> All applicable health education is provided</p>	X				
<p><b><u>PREA Medical Review:</u></b>  <b>Screen 7:</b> A mental health referral is submitted following the completion of the medical screening</p>	X				
<p><b>Screen 8:</b> The inmate is evaluated by mental health by the next working day</p>		X			

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 4 of the 9 mental health findings were corrected. Five mental health findings 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><b><u>Self-Injury and Suicide Prevention</u></b>  <b><u>Review:</u></b>  <b>Screen 4:</b> The inmate is observed at the frequency ordered by the clinician</p>		X			
<p><b><u>Mental Health Inmate Request:</u></b>  <b>Screen 5:</b> Consent for treatment is obtained prior to conducting an interview</p>	X				
<p><b><u>Outpatient Psychotropic Medications:</u></b>  <b>Screen 5:</b> Appropriate follow-up laboratory studies are ordered and conducted as required.</p>		X			
<p><b>Screen 8:</b> The inmate receives medication(s) as prescribed</p>	X				
<p><b>Screen 9:</b> The nurse meets with the inmate if he/she refused psychotropic medication for two consecutive days and referred to the clinician if needed</p>		X			

<b>Finding</b>	<b>Closed</b>	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
<b>Screen 10:</b> The inmate signs DC4-711A "Refusal of Health Care Services" after three consecutive OR five medication refusals in one month.		<b>X</b>			
<b>Screen 13:</b> Follow-up sessions are conducted at appropriate intervals		<b>X</b>			
<b>Screen 14:</b> Documentation of psychiatric encounters is complete and accurate	<b>X</b>				
<u><b>Outpatient Mental Health Services:</b></u> <b>Screen 10:</b> The BPSA is approved by the treatment team within 30 days of initiation of mental health services	<b>X</b>				

#### **IV. Conclusion**

Until appropriate corrective actions are undertaken by BRCF 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 offsite evaluation.