# THIRD ON-SITE CORRECTIVE ACTION PLAN ASSESSMENT

of

# **CENTRAL FLORIDA RECEPTION CENTER**

for the

Physical and Mental Health Survey Conducted February 5-6, 2014

# **CMA STAFF**

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## **CAP Assessment of Central Florida Reception Center**

#### 1. Overview

On February 5-6, 2014, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Central Florida Reception Center (CFRC). The survey report was distributed on March 3, 2014. In April of 2014, CFRC submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the February 2014 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. In July 2014, 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 by CFRC. the CMA conducted an off-site CAP assessment on July 29, 2014 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that all physical and mental health findings would remain open due to insufficient monitoring. In October 2014, CMA staff again requested access to monitoring documentation. Based on the documents provided, the CMA conducted an on-site assessment on November 3 and 4, 2014. The CAP closure files revealed sufficient evidence to determine that on the Main Unit, 19 of 26 physical health findings and 21 of 25 mental health findings were corrected. Additionally, the CAP closure files revealed sufficient evidence to determine that 24 of 27 physical health findings and 5 of 8 mental health findings could be closed on the East Unit. On February 26, 2015 CMA staff again requested access to monitoring documentation. Based on the documents provided, the CMA conducted an on-site assessment on March 16, 2015. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the remaining survey findings.

## **II. Physical Health Assessment Summary**

#### A. Main Unit

The CAP closure files revealed that 7 of 7 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
INFIRMARY RECORD REVIEW	PH-5(a) CLOSED
PH-5(a): In 1 of 4 applicable records (10 reviewed), there was no evidence that a discharge note was completed for a patient on 23-hour observation status.	Adequate evidence of in-service training and documentation of correction were provided to close PH-5(a).

Finding	CAP Evaluation Outcome
EMERGENCY CARE RECORD REVIEW	PH-6(a) & (b) CLOSED
PH-6: A comprehensive review of 14 inmate records revealed the following deficiencies:	Adequate evidence of in-service training and documentation of correction were provided to close PH-6(a) & (b).
(a) In 1 of 1 applicable record, there was no evidence of timely follow-up after the patient returned to the institution following inpatient care at a local hospital.	
(b) In 1 of 2 applicable records, there was no evidence of complete and adequate follow-up to address the complaint/condition.	

Finding	CAP Evaluation Outcome
PERIODIC SCREENING RECORD REVIEW	PH-9(a) CLOSED
PH-9(a): In 4 of 5 inmate records reviewed, there was no evidence the periodic screening encounter occurred within 1 month of the due date.	Adequate evidence of in-service training and documentation of correction were provided to close PH-9(a).

Finding	CAP Evaluation Outcome
INTRA-SYSTEM TRANSFERS RECORD REVIEW	PH-10(a) – (c) CLOSED
PH-10: A comprehensive review of 10 inmate records revealed the following deficiencies:	Adequate evidence of in-service training and documentation of correction were provided to close PH-10(a) – (c).
(a) In 2 records, the "Health Information Transfer/Arrival Summary" (DC4-760A) was incomplete.	
(b) In 2 records, there was no evidence that vital signs were taken.	

Finding	CAP Evaluation Outcome
(c) In 8 of 9 applicable records, there was no evidence that the clinician reviewed the health record and DC4-760A within 7 days of arrival.	

# B. East Unit

The CAP closure files revealed that 3 of 3 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
ONCOLOGY CLINIC RECORD REVIEW	PH-6(c) CLOSED
PH-6(c): In 1 of 1 record reviewed, the baseline laboratory work was incomplete or missing.	Adequate evidence of in-service training and documentation of correction were provided to close PH-6(c).

Finding	CAP Evaluation Outcome
RESPIRATORY CLINIC RECORD REVIEW	PH-7(a) CLOSED
PH-7(a): In 3 of 7 records reviewed, the baseline history was incomplete or missing.	Adequate evidence of in-service training and documentation of correction were provided to close PH-7(a).

Finding	CAP Evaluation Outcome
DENTAL SERVICES REVIEW	PH-9(b) CLOSED
PH-9(b): A review of dental services revealed that dental operatories were not in proper working condition.	Adequate evidence of correction was provided to close PH-9(b).

# **III. Mental Health Assessment Summary**

# A. Main Unit

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

Finding	CAP Evaluation Outcome
USE OF FORCE	MH-2(a) & (b) CLOSED
MH-2: A comprehensive review of 1 use of force incident revealed the following deficiencies:	Adequate evidence of in-service training and documentation of correction were provided to close MH-2(a) & (b).
(a) In 1 record, a written referral to mental health by physical health staff was not present in the medical record.	
(b) In 1 record, there was no indication that mental health staff interviewed the inmate the next working day to determine level of mental health care needed.	

Finding	CAP Evaluation Outcome
SPECIAL HOUSING	MH-4(b) CLOSED
MH-4(b): In 1 of 5 applicable records (18 reviewed), psychotropic medications ordered were not continued as directed while the patient was held in special housing.	Adequate evidence of in-service training and documentation of correction were provided to close MH-4(b).

Finding	CAP Evaluation Outcome
RECEPTION PROCESS	MH-7(b) CLOSED
MH-7(b): In 1 of 1 applicable record (16 reviewed), there was no signed release or refusal for past treatment records and no documentation that those records were requested for inmates who have been at the reception center for 60 days.	Adequate evidence of in-service training and documentation of correction were provided to close MH-7(b).

#### B. East Unit

The CAP closure files revealed that 0 of 3 mental health findings were corrected. Three mental health findings will remain open.

Finding	CAP Evaluation Outcome
OUTPATIENT MENTAL HEALTH SERVICES	MH-2(a) OPEN
<ul> <li>MH-2: A comprehensive review of 9 outpatient records (S2) revealed the following deficiencies:</li> <li>(a) In 1 of 2 applicable records, there was no indication that the clinician reviewed the chart within 24 hours of the inmate's arrival.</li> </ul>	Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached.  MH-2(a) will remain open.  MH-2(c) & (e) OPEN
<ul><li>(c) In 1 of 1 applicable record, the sex offender screening was not present.</li><li>(e) In 1 of 2 applicable records, the ISP was not revised at 180 day intervals.</li></ul>	Adequate evidence of in-service training was provided, however there were no episodes that were applicable to this finding during the monitoring period. Institutional staff will continue to monitor. MH-2(c) & (e) will remain open.

#### **IV. Conclusion**

# **Physical Health-Main Unit**

All physical health findings are closed.

Physical Health-East Unit All physical health findings are closed.

# **Mental Health-Main Unit**

All mental health findings are closed.

# **Mental Health-East Unit**

MH-2(a), (c), & (e) will remain open.

Until such time as appropriate corrective actions are undertaken by CFRC 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.