

**SECOND CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**CENTRAL FLORIDA RECEPTION CENTER – MAIN UNIT**

for the

Physical and Mental Health Survey  
Conducted July 11-12, 2023

**CMA STAFF**

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**I. Overview**

On July 11-12, 2023, 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 August 22, 2023. In September 2023, 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 CFRC 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 Central Florida Reception Center - Main Unit**

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	March 7, 2024	56	24	32
2	June 17, 2024	24	20	4

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 4 of the 14 physical health findings were corrected. Ten 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><u>Gastrointestinal Chronic Illness Clinic:</u></b> <b>Screen 7:</b> There is evidence of hepatitis A and/or B vaccination for inmates with hepatitis C and no evidence of past infection		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
<b>General Chronic Illness Clinic:</b> <b>Screen 3:</b> The inmate is seen at intervals required for their M-grade or at intervals specified by the clinician		X			
<b>Immunity Chronic Illness Clinic:</b> <b>Screen 2:</b> There is evidence of an appropriate physical examination.	X				
<b>Screen 10:</b> There is evidence of hepatitis B vaccination for inmates with no evidence of past infection		X			
<b>Outpatient Infirmary Care:</b> <b>Screen 4:</b> Patient evaluations are documented at least once every eight hours		X			
<b>Inpatient Infirmary Care:</b> <b>Screen 6:</b> Clinician rounds are completed and documented as required		X			
<b>Medical Inmate Requests:</b> <b>Screen 3:</b> The response to the request is direct, addresses the stated need and is clinically appropriate	X				
<b>Screen 4:</b> The follow-up to the request occurs as intended	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>Medication And Vaccination Administration:</u> <b>Screen 1:</b> The inmate receives medications as prescribed	X				
<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
<b>Screen 4:</b> There is evidence of pneumococcal vaccination or refusal		X			
<u>Periodic Screenings:</u> <b>Screen 2:</b> All components of the screening are completed and documented as required		X			
<b>Screen 5:</b> All applicable health education is provided		X			
<u>Reception Services:</u> <b>Screen 5:</b> Within 7 days of arrival, newly committed inmates receive required laboratory testing.		X			

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 0 of the 10 mental health findings were corrected. 10 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 Review:</u></b>  <b>Screen 4:</b> The inmate is observed at the frequency ordered by the clinician</p>		X			
<p><b><u>Reception Services:</u></b>  <b>Screen 8:</b> If the inmate was taking prescribed psychotropic medication when received from the county jail, this medication is continued without interruption</p>		X			
<p><b>Screen 15:</b> If the inmate has a history of mental health treatment and has been at the reception center for 60 days, past treatment records are requested.</p>		X			
<p><b><u>Outpatient Psychotropic Medication Services:</u></b>  <b>Screen 8:</b> The inmate receives medication(s) as prescribed</p>		X			

<b>Finding</b>	<b>Closed</b>	<b>Open: Evaluation of records indicated an acceptable level of compliance was not met</b>	<b>Open: No episodes were available for review</b>	<b>Open: Institutional monitoring was inadequate</b>	<b>Open: Institutional monitoring indicated compliance was not met</b>
<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.		<b>X</b>			
<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 16:</b> The rationale for the emergency treatment order (ETO) is documented and clinically appropriate.			<b>X</b>		
<b>Screen 17:</b> The use of the ETO is accompanied by a physician's order specifying the medication as an ETO.			<b>X</b>		
<b><u>Mental Health Inmate Request:</u></b> <b>Screen 4:</b> The follow-up to the request occurs as intended		<b>X</b>			

#### **IV. Conclusion**

Until 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.