THIRD CORRECTIVE ACTION PLAN ASSESSMENT

of

CENTRAL FLORIDA RECEPTION CENTER - SOUTH UNIT

for the

Physical and Mental Health Survey Conducted July 11-13, 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 – South Unit (CFRC-South). The survey report was distributed on August 22, 2023. In September 2023, CFRC-South 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-South 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 – South Unit

CAP#	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	March 6, 2024	29	14	15
2	June 18, 2024	14	13	1
3	October 18, 2024	13	11	2

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 1 of the 4 physical health findings were corrected. Three physical health findings remain open, as there were no applicable episodes to review.

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
Medical Inmate Requests: Screen 4: 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
Medication And Vaccination Administration: Screen 3: If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance			X		
PREA Medical Review: Screen 7: A mental health referral is submitted following the completion of the medical screening			X		
Screen 8: The inmate is evaluated by mental health by the next working day			x		

III. Mental Health Assessment Summary

A. South Unit

The CAP closure files revealed sufficient evidence to determine that 1 of the 9 mental health findings were corrected. Eight mental health findings will remain open. Seven of these findings remain open due to the lack of applicable episodes.

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
Mental Health Inmate Request: Screen 1: A copy of the inmate request form is present in the electronic health record			X		
Screen 2: The request is responded to within the appropriate time frame			x		
Screen 3: The response to the request is direct, addresses the stated need, and is clinically appropriate			х		
Screen 4: The follow-up to the request occurs as intended			X		
Screen 5: Consent for treatment is obtained prior to conducting an interview			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
Outpatient Psychotropic					
Medication Services:					
Screen 9: The nurse meets with			X		
the inmate if he/she refused					
psychotropic medication for two					
consecutive days and referred to					
the clinician if needed.					
Screen 10: The inmate signs DC4-					
711A "Refusal of Health Care			X		
Services" after three consecutive					
OR five medication refusals in one month					
Outpatient Mental Health					
Services:		X			
Screen 16: The ISP is signed by the					
inmate and all members of the					
treatment team					
Screen 17: The ISP is reviewed and					
revised at least every 180 days	X				

IV. Conclusion

Until appropriate corrective actions are undertaken by CFRC-South 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.