

**CORRECTIONAL MEDICAL AUTHORITY (CMA)  
MINUTES FROM BOARD MEETING  
MARCH 26, 2014  
TALLAHASSEE, FLORIDA**

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**AGENDA ITEM - DISCUSSION**

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**LOCATION:** The Correctional Medical Authority met on March 26, 2014, in Tallahassee, Florida. Notice of the meeting was published and emailed to CMA members.

**MEMBERS PRESENT:** Dr. Peter C. Debelius-Enemark, Dr. Katherine Langston

**MEMBERS PRESENT BY PHONE:** Dr. Harvey Novack , Annette Phelps, Lee Chaykin, and Leigh-Ann Cuddy

**MEMBERS ABSENT:** Ryan Beaty

**DOC REPRESENTATIVES PRESENT:** Dean Aufderhneide, Dr. Olu Ogunsanwo, Collean D'Acquisto, Dr. Long Do, Stephen Whitfield, Dr. Thomas Shields, Tom Reimers, Jennifer Dudley, Cynthia Jevyak

**CMA STAFF PRESENT:** Jane Holmes-Cain, Teri Palmer, Matthew Byrge, Kathy McLaughlin, Lynne Babchuck, Rachel Brock

**CMA LEGAL REPRESENTATION PRESENT:** Breck, Brannen

**EOG/OPB/PSU REPRESENTATIVES PRESENT BY PHONE:** Bonnie Rogers, Kristen Manalo

**CORIZON REPRESENTATIVES PRESENT:** Elaine Carpino-Pettegrow, Kelly Durm

**WEXFORD REPRESENTATIVE PRESENT:** Martha Ingram

**CALL TO ORDER:** Chair - Dr. Peter C. Debelius-Enemark officially called the meeting to order at 1:12 p.m. and all attendees introduced themselves.

❖ **INTRODUCTION OF NEW CMA STAFF MEMBER:**

Jane Holmes-Cain, Executive Director introduced the new Program Analyst taking Holli McClanahan's place, Teri Palmer joins the CMA team from the Office of Policy and Budget, Public Safety Unit and has a BSW.

❖ **APPROVAL OF THE OCTOBER AND DECEMBER 2013, AND THE JANUARY 2014 CMA MINUTES:**

Chair - Dr. Peter C. Debelius-Enemark - Once a quorum was reached, board member Leigh Ann Cuddy moved that the minutes be approved. There were no objections and the motion passed.

❖ **DIRECTOR'S REPORT:**

Jane Holmes-Cain - Executive Director

Five surveys completed since last meeting including Martin, Homestead, Taylor, CFRC, and Hernando. Five institutional CAPS have been received. Suwannee will be reviewed tomorrow, Santa Rosa will have an on-site inspection in May, and SFRC, Homestead, and Martin are scheduled for June. A portion of Taylor's CAP has been received and their review will take place sometime over the summer. Four CAP assessments have been completed. Our first survey at Zephyrhills had an off-site CAP assessment in December 2013 resulting in six of seven physical health findings being closed and two of five mental health findings being closed. The remaining monitoring materials have been requested this week in hopes of finalizing this CAP. The Union on-site CAP assessment was conducted in January and resulted in 18 out of 21 physical health findings closing and 19 of 31 mental health findings were closed. It is likely the CMA will return to Union for another on-site CAP review to assess the closure of the 12 mental health findings. The Cross City off-site CAP assessment took place in January 2014, with 4 of 5 physical health findings being closed and 1 of 2 mental health findings closing. There will be a final off-site assessment for Cross City's few remaining findings. Finally, Jefferson's CAP assessment occurred in February resulting in 55 out of 72 physical health findings closing and 19 of 31 mental health findings closed. We will be completing another on-site assessment at Jefferson in the future as well.

On January 30, 2014, we conducted CAP training for Wexford and Corizon and had a good turnout for reviewing the monitoring tools and going over timelines, record selections, and assessment process. Physical health monitoring appears to be going smoothly however there are some difficulties with the mental health monitoring. We ask the institutions to send us their monitoring materials to assess if we need to complete an on-site or off-site CAP assessment. Mental health appears to have insufficient monitoring with records not being selected from the appropriate areas resulting in many records that are not applicable as well as records that were admitted before the actual survey. There is also a lot of inconsistencies in the monitoring; sometimes they may use a yes/no response and then a 1/0 response on the tool and records may be monitored one week but not the next. There is concern that perhaps the information is not being communicated adequately to the institutions therefore we have developed some “CAP Tips” and have offered to provide guidance to institutional staff.

The CMA schedule for 2014-15 is available and we will be increasing the number of surveys from 13 to 16. We have tried to take in to account the ACA surveys and the institutional contract monitoring in an attempt to avoid any conflict. On the months where there are two surveys in the same month, we will have mental health completed one day at each facility and two physical health teams working, one led by Kathy McLaughlin and the other led by Lynne Babchuck in hopes of saving some travel dollars and time.

We are required to hold quarterly Quality Management (QM) Committee meetings by statute to review the DOC mortality review process. One of the four meetings will focus on suicide. Our first meeting will be end of May or early June. Teri Palmer will be coordinating this meeting with the help of Priscilla Wood, our OPS Analyst who handled these meetings for many years. We have a great committee including Annette Phelps as the board representative; Vicki Lund, ARNP who consults with the Department of Justice and has been a long time surveyor; Patty Convertino, a Licensed Health Care Risk Manager and the Administrative Services Director with Apalachee Center, a community mental health facility here in Tallahassee; and the chairman will be Dr. Phillip Barkley, the Vaccine Director for Merck who has chaired this committee in the past.

Reminder to the board that although we do not have our map to outline the different facilities, keep in mind that the 11 Wexford facilities are generally south of Okeechobee, everything north of that is handled by Corizon except for the two completely private prisons who subcontract their own healthcare through DMS.

❖ **WEXFORD HEALTH SOURCES – QUALITY IMPROVEMENT PRESENTATION:**

Martha Ingram - Director of Quality presented an overview of the company's quality management process with accompanying materials available for review.

❖ **CORIZON – QUALITY IMPROVEMENT PRESENTATION:**

Elaine Pettegrow – Vice President of Nursing Services and Kelly Durm, Regional CQI Coordinator presented an overview of the company's quality management process with accompanying materials available for review.

❖ **DOC – UPDATE ON TAYLOR CAP:**

Tom Reimers – Director of Health Services reported that he and Dr. Ogansanwo from DOC met with Taylor's leadership and corporate members of Corizon and identified the top 25 items of concern to be addressed at the facility related to quality of care. The new model being implemented by DOC will be for the institutions to include the Department on submissions of corrective action plan updates when sending the information to the CMA as well as the ACA to ensure appropriate actions are taken. DOC was happy to see that Taylor had taken immediate action and had a preliminary CAP available for DOC to review as well as having their data entry deficit caught up. The Department is confident that the situation will be greatly improved when the CMA returns and felt it was important that DOC and Corizon work together on addressing the Board's concerns.

❖ **DOC – STATEWIDE QUALITY MANAGEMENT:**

Dr. Long Do - Director of Medical Services reported the Department is working on developing a statewide quality management program by changing the way they collect data and having a quarterly meeting.

Jennifer Dudley - Quality Management Program Manager presented an overview of the Department's quality management process with accompanying materials available for review.

❖ **CMA GENERAL COUNSELS REPORT:**

Breck Brannen reported we did receive a complaint that named the CMA which was referred to the Attorney General's office as we were not a party to the issue and it is believed to have been dismissed. No further legal issues to discuss.

❖ **NEW BUSINESS/MISCELLANEOUS:**

There were no further questions and no new business to be discussed.

❖ **ADJOURNMENT:**

The meeting was adjourned at 2:32 p.m.

Respectfully submitted,

Teri Palmer, BSW