

**CORRECTIONAL MEDICAL AUTHORITY (CMA)
MINUTES FROM BOARD MEETING
October 7, 2014
TALLAHASSEE, FLORIDA**

AGENDA ITEM - DISCUSSION

LOCATION: The Correctional Medical Authority held their monthly board meeting in Tallahassee, Florida, (Conference Call: 1-888-670-3525; Conference Code: 6468673392#) at 2:00 PM. Notice of the meeting was published in the Florida Administrative Weekly and emailed to CMA members.

MEMBERS PRESENT: Dr. Peter C. Debelius-Enemark, Dr. Harvey Novack , Ms. Annette Phelps, Mr. Ryan Beaty, and Mr. Lee Chaykin

DOC REPRESENTATIVES PRESENT: Dr. Olu Ogunsanwo, Dr. Long Do, Stephen Whitfield, Dr. Thomas Shields, David Randall, Collean D'Acquisto, Dr. Long Do, Tom Reimers, Laura Carter, Dr. Dean Aufderheide

CMA STAFF PRESENT: Jane Holmes-Cain, Teri Palmer, Kathy McLaughlin, Lynne Babchuck, and Matt Byrge

CMA LEGAL REPRESENTATIVE: Breck Brannen

EOG/OPB/PSU REPRESENTATIVES PRESENT: Lindsey Perkins

CORIZON REPRESENTATIVES PRESENT: John Dallas, Dr. Daniel Cherry, Elaine Carpino-Pettegrow, Kelly Durm, John Rainey, Michael Johnson, Becky Pinniy, Dr. Ariel Gonzalez, Michelle Hanson, Dr. Tapia, Edward Zinnie, Dr. Amagucci

WEXFORD REPRESENTATIVE PRESENT: Marty Kovacs, Don Hulick

CALL TO ORDER: Chair - Dr. Peter C. Debelius-Enemark officially called the meeting to order at 2:05 p.m. and attendees introduced themselves.

❖ **APPROVAL OF THE SEPTEMBER 2014 CMA MINUTES:**

Chair - Dr. Peter C. Debelius-Enemark – Board member Ryan Beaty moved and Annette Phelps seconded the approval of the September 2014 minutes which were unanimously approved.

❖ **DIRECTOR’S REPORT:** Jane Holmes-Cain - Executive Director

Survey Update: Lake Correctional Institution was surveyed on August 13th and 14th. There were 24 physical health findings including baseline information and vaccinations in the chronic illness clinics and patients not receiving the correct number of INH doses in the TB clinic. Nursing concerns included incomplete periodic screenings with missing diagnostic tests and no documentation of patient education as well as findings related to infirmary discharges. The dental findings consisted of some equipment not working, inaccurate charting, and a consultation finding.

There were 48 mental health findings that we were concerned about in relation to the totality of findings and their severity. A major concern was inmates not receiving psychotropic medications as prescribed when many of these prescriptions require titration to prevent adverse reactions. Proper monitoring of inmates in restraints was not completed and restraints were not removed when the inmate’s behavior no longer warranted such restriction. There were inconsistencies in behavioral assessments and the provision of services in the inpatient units. Psychiatric medications for both inpatient and outpatient had missing labs, consent forms, and psychiatric assessments and the administration of emergency treatment orders often had no rationale or orders; and were not the least restrictive treatments. In confinement, SHOS and inpatient nursing evaluations were incomplete and some aftercare planning requirements were not met. Finally, record thinning did not follow department requirements in physical or mental health.

Tomoka Correctional Institution was surveyed on September 10th and 11th with 30 physical health findings similar to those seen at Lack CI including missing baseline information and vaccines in chronic illness clinics as well as incorrect INH dosing in the TB clinic. There were findings regarding the transcription of orders, failure to implement them, provide patient education or perform necessary evaluations and follow-up. There were some instances where inappropriate medications were prescribed. Some dental equipment was not in working order.

Tomoka's 20 mental health findings consisted of documentation and frequency of psychiatric contacts and assessments. There is only one MD for over 500 inmates and a half-time position vacant that has been open for four months. Additional findings included no consistency of inmates being seen by mental health following a use of force incident and ISPs not being completed timely. Record keeping was also an issue with missing documents and disorganization.

Northwest Florida Reception Center was completed last week and the report should be available within the next couple of weeks.

Discussion: Member Ryan Beaty stated that it seemed like there were a lot of findings but this was the first time Tomoka and Lake had been surveyed under the new regime and Director Holmes-Cain confirmed that Lake had not been surveyed since 2010 and Tomoka since 2009. All of CMA's surveys are with the new contractors and the agency is required by statute to survey each prison every three years. Member Annette Phelps verified if the Department monitored these institutions as well and Tom Reimers stated they do so every six months and ad hoc monitoring when necessary. Ms. Phelps asked if DOC's findings were similar and Mr. Reimers affirmed that they were. The Department has only completed one full monitoring at Lake and a limited monitoring last week. They do not have the corrective action plan results yet but they will return in the next few months. Member Lee Chaykin mentioned the demeanor of these surveys that seemed alarming and wondered about the attitude of the staff at the prisons. Director Holmes-Cain indicated that the institutional staffs seemed to be very receptive and felt like they are often aware of the problems they face and want to correct them. John Dallas from Corizon reports trying to work with the Department and the CMA; there were administrative changes made at Lake and some of the issues such as vaccinations go back a long way and they are putting more resources in these institutions to address these findings. There were some gains such as the use of force incidents decreasing even though there were findings related to use of force. Mr. Beaty asked about the administrative changes and Mr. Dallas indicated that some people were removed from the institutions and others were moved to less complex positions. Corizon will give people opportunities to succeed if at all possible. Ryan was alarmed at the amount of findings and wondered if the Authority was using different tools and the Director indicated that we use the same tools which are and always have been linked to the Department's Health Service Bulletins (HSB). He was also concerned that the employees were the same as they were before and John Dallas stated that roughly 97% of the previous staff remained with Corizon and is doing basically the same jobs they were before.

CAP Reports: The CMA did seven CAP assessments over the last month starting with Cross City for their third assessment which is our first institution to close completely. Union CI had its third assessment which also closed completely. The staff and Board acknowledge that this is a good thing. Hernando had their first CAP assessment which went well with only three

physical health findings remaining open. FSP's first onsite assessment also had only three physical health findings remain open on the Main Unit and five physical health findings left open on the West Unit. All mental health findings closed. The CMA is pleased with the efforts by FSP and Hernando to address the findings noted in their surveys.

In the South, Homestead's second CAP assessment left only one physical health finding open which is very good. Martin's second assessment left 32 physical health findings and eight mental health findings open. South Florida Reception Center's second CAP assessment had two physical health findings and seven mental health findings left open on the Main Unit due to no episodes occurring applicable to the monitoring. At the South Unit, four documentation and baseline issues remained open and there were no mental health findings.

Discussion: Ryan Beaty addressed the second Martin CAP assessment still showing thirty two findings open and some on the mental health. Director Holmes-Cain explained that initially they were monitoring incorrectly which was corrected but towards the end of the monitoring period they stopped monitoring for almost the last six weeks. Some findings remain open due to inadequate monitoring. The records that were reviewed at Martin showed improvement. Member Harvey Novack questioned how many times the Authority would go back to review these open findings. There is no set timeframe in statute for closure. The CMA staff will continue to follow up until all findings have been corrected and will continue to report on these findings. Dr. Novack wondered if there could be a time limit set followed by additional action being taken and Lee Chaykin mentioned that this may have been addressed in the DOC Secretary's letter to Corizon. Tom Reimers stated that the letter referred to monies being withheld until corrections were made relating to the Department's contract management. The Department is in communication with the CMA about these findings and if they continue to require review by the Authority, the costs involved and the compliance issues are discussed with Corizon understanding that the CAPs are expected to close timely. Managing the CMA and the Department's Corrective Action Plans do create a workload issue for the institutions.

Annette questioned what the penalties tied to the contract's were and if in the future there could be a penalty clause for the contractors to recoup the cost of ongoing assessments if that becomes an issue. Tom Reimers indicated this was a good suggestion for future contracts but the current language does not include this type of penalty.

Upcoming Surveys and CAPs: The CMA will survey Okeechobee and Moore Haven in November as well as the first on-site assessment at Gadsden and the second at CFRC, Suwannee, and the third on-site at Jefferson followed by a fourth review from Zephyrhills.

Discussion: Member Ryan Beaty hopes that we will see improvement in the results as we go through these and Jane will give a full report next month. No further discussion about surveys and CAPs.

❖ **CMA QUALITY MANAGEMENT COMMITTEE MEETING (QMC):** Teri Palmer – Program Analyst

The QMC held its quarterly meeting on September 25, 2015. Nancy Replinger of the Department reviewed the Mortality Review Process training completed by DOC with the healthcare contractors and she provided an overview of the mortality data now being published on the Department’s website. Additionally, Dr. Do updated the committee about ongoing action items between the Department and Corizon and the improvements that are being implemented. We reviewed four records. Two record reviews were completed and two remain pending awaiting additional information from Corizon. They will be completed at the beginning of our next quarterly meeting in December. Dr. Bailey will be joining us at that time to review the suicide mortality records and the committee will be ready to report on those findings to the Department.

❖ **CMA General Counsel’s Report:** Breck Brannen

There is nothing to report at this time and no legal actions pending for the authority.

❖ **NEW BUSINESS/MISCELLANEOUS:**

None

❖ **ADJOURNMENT:**

The meeting was adjourned at 2:35 p.m.

Respectfully submitted,

Teri Palmer, BSW