

**FIRST ON-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

CENTRAL FLORIDA RECEPTION CENTER

for the

Physical and Mental Health Survey
Conducted May 8-10, 2018

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CAP Assessment of Central Florida Reception Center

I. Overview

On May 8–10, 2018, 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 June 4, 2018. In July 2018, 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 May 2018 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days. On November 9, 2018, 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, CMA staff conducted an on-site CAP assessment on December 5, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. Items II and III below describe the outcome of the CMA’s evaluation of the institution’s efforts to address the survey findings.

II. Physical Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 16 of the 18 physical health findings were corrected. Two physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>CHRONIC ILLNESS CLINIC RECORD REVIEW</u></p> <p>PH-1: In 3 of 14 records reviewed, there was no evidence that inmates were seen according to their M-grade.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC</u></p> <p>PH-2: In 3 of 7 applicable records (12 reviewed), there was no evidence that inmates with HgbA1c over 8.0 were seen every three months as required.</p>	<p>PH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. PH-2 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>PH-3: In 2 of 8 records reviewed, there was no evidence of hepatitis A and/or B vaccination or refusal.</p>	<p>PH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>MISCELLANEOUS CLINIC</u></p> <p>A comprehensive review of 8 records revealed the following deficiencies:</p> <p>PH-4: In 2 records, there was no documentation as to the status of the patient.</p> <p>PH-5: In 2 of 5 applicable records, there was no evidence of a referral to a specialist when indicated.</p>	<p>PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4.</p> <p>PH-5 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-5 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC</u></p> <p>A comprehensive review of 5 records revealed the following deficiencies:</p> <p>PH-6: In 2 records, there was no evidence that seizures were classified as primary generalized (tonic-clonic, grand mal), primary or simple absence (petit mal), simple partial, or complex partial seizures.</p> <p>PH-7: In 1 of 1 applicable record, there was no evidence that abnormal labs were addressed in a timely manner.</p>	<p>PH-6 & PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6 & PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>EMERGENCY CARE</u></p> <p>PH-8: In 3 of 15 records reviewed, there was no evidence of complete vital signs.</p>	<p>PH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>INFIRMARY CARE</u></p> <p>PH-9: In 4 of 11 applicable records (12 reviewed), there was no evidence that all orders were received and implemented.</p>	<p>PH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>A comprehensive review of 13 records revealed the following deficiencies:</p> <p>PH-10: In 3 of 12 applicable records, there was no evidence the consultant's treatment recommendations were incorporated into the treatment plan.</p> <p>PH-11: In 5 of 12 applicable records, there was no evidence appointments for follow-up or additional diagnostics were completed per the consultant's recommendations.</p>	<p>PH-10 & PH-11 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10 & PH-11.</p>

Finding	CAP Evaluation Outcome
<p><u>INTRA-SYSTEM TRANSFERS</u></p> <p>PH-12: In 3 of 14 applicable records (15 reviewed), there was no evidence of complete vital signs.</p>	<p>PH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-12.</p>

Finding	CAP Evaluation Outcome
<p><u>PERIODIC SCREENINGS</u></p> <p>PH-13: In 3 of 9 applicable records (10 reviewed), there was no evidence that all diagnostic tests were completed as required.</p>	<p>PH-13 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-13.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL CARE</u></p> <p>A comprehensive review of 18 records revealed the following deficiencies:</p> <p>PH-14: In 2 of 9 applicable records, there was no evidence of complete and accurate charting of dental findings.</p> <p>PH-15: In 4 of 15 applicable records, there was no evidence that post-treatment/operative instructions were given.</p>	<p>PH-14 & PH-15 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-14 & PH-15.</p>

Finding	CAP Evaluation Outcome
<p><u>RECEPTION PROCESS</u></p> <p>PH-16: There was no evidence that inmates' medical information and privacy was protected.</p>	<p>PH-16 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-16.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>A tour of the facility revealed the following deficiencies:</p> <p>PH-17: There was no evidence of current logs for all medical refrigerators.</p> <p>PH-18: There was no evidence that pill line schedules were posted in all inmate common areas.</p>	<p>PH-17 & PH-18 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-17 & PH-18.</p>

B. East Unit

The CAP closure files revealed sufficient evidence to determine that 14 of the 15 physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>IMMUNITY CLINIC</u></p> <p>PH-1: In 2 of 6 records reviewed, there was no evidence of an appropriate physical examination.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>MISCELLANEOUS CLINIC</u></p> <p>A comprehensive review of 4 records revealed the following deficiencies:</p> <p>PH-2: In 1 record, there was no evidence of an appropriate examination for the diagnosis.</p> <p>PH-3: In 1 record, medications were not evaluated at each visit.</p> <p>PH-4: In 1 record, control of the disease or disorder was not evaluated at each clinic visit.</p>	<p>PH-2, PH-3, & PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2, PH-3, & PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>SICK CALL</u></p> <p>PH-5: In 4 of 5 applicable records (15 reviewed), there was no evidence that follow-up was completed timely.</p>	<p>PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>PERIODIC SCREENINGS</u></p> <p>A comprehensive review of 14 records revealed the following deficiencies:</p> <p>PH-6: In 4 records, there was no evidence that all diagnostic tests were completed as required.</p> <p>PH-7: In 3 of 6 applicable records, a referral was not made to a clinician when indicated.</p>	<p>PH-6 & PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6 & PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>PH-8: In 1 of 3 records reviewed, the diagnosis was not recorded on the problem list.</p>	<p>PH-8 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-8 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>INTRA-SYSTEM TRANSFERS</u></p> <p>PH-9: In 2 of 6 records reviewed, there was no indication that the clinician reviewed the record within 7 days.</p>	<p>PH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9.</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICAL INMATE REQUESTS</u></p> <p>PH-10: In 3 of 14 records reviewed, the inmate request was not present in the record.</p>	<p>PH-10 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>PH-11: Equipment and supplies were not stored properly.</p> <p>PH-12: There was no evidence of current and complete logs for all medical refrigerators.</p> <p>PH-13: Necessary supplies were not available in the emergency center.</p> <p>PH-14: Required information for inmates was not posted in all inmate housing areas.</p> <p>PH-15: There was an inadequate system for tracking inmate requests.</p>	<p>PH-11, PH-12, PH-13, PH-14, & PH-15 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11, PH-12, PH-13, PH-14, & PH-15.</p>

C. South Unit

The CAP closure files revealed sufficient evidence to determine that 4 of the 6 physical health findings were corrected. Two physical health findings will remain open.

Finding	CAP Evaluation Outcome
<u>ENDOCRINE CLINIC</u> PH-1: In 1 of 1 applicable record (10 reviewed), inmates with HgbA1C levels over 8.0 were not seen every three months as required.	PH-1 OPEN Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. PH-1 will remain open.

Finding	CAP Evaluation Outcome
<u>EMERGENCY CARE</u> PH-2: In 1 of 1 applicable record (10 reviewed), follow-up visits were not initiated or completed timely.	PH-2 OPEN Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-2 will remain open.

Finding	CAP Evaluation Outcome
<u>SICK CALL</u> PH-3: In 1 of 5 applicable records (13 reviewed), follow-up visits were not completed timely.	PH-3 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-3.

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>A comprehensive review of 4 inmate records revealed the following deficiencies:</p> <p>PH-4: In 1 record, follow-up appointments were not completed timely.</p> <p>PH-5: In 1 record, the consultation log was incomplete.</p>	<p>PH-4 & PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4 & PH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>A tour of the facility revealed the following deficiency:</p> <p>PH-6: There was no evidence first-aid kits were inspected monthly.</p>	<p>PH-6 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-6.</p>

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed evidence to determine that 6 of 17 mental health findings were corrected. Eleven mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 6 records revealed the following deficiencies:</p> <p>MH-1: In 1 of 1 applicable record, the guidelines for SHOS management were not observed.</p>	<p>MH-1 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-1 will remain open.</p>

Finding	CAP Evaluation Outcome
<p>MH-2: In 2 records, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p> <p>MH-3: In 2 records, the “Inpatient Mental Health Daily Nursing Evaluation” (DC4-673B) was not completed once per shift.</p> <p>MH-4: In 3 records, all entries were not signed.</p>	<p>MH-2 & MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2 & MH-3.</p> <p>MH-4 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-4 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>USE OF FORCE</u></p> <p>A comprehensive review of 4 records revealed the following deficiencies:</p> <p>MH-5: In 2 records, the post use of force examination was incomplete.</p> <p>MH-6: In 4 records, a written referral to mental health by physical health staff was not present.</p> <p>MH-7: In 2 records, the inmate was not seen by mental health staff the next working day to determine if a higher level of care was needed.</p>	<p>MH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5.</p> <p>MH-6 & MH-7 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-6 & PH-7 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>SPECIAL HOUSING</u></p> <p>MH-8: In 2 of 8 records reviewed, the “Special Housing Health Appraisal” (DC4-769) was incomplete or missing.</p>	<p>MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>INMATE REQUESTS</u></p> <p>MH-9: In 1 of 5 records reviewed, a Consent to Mental Health Evaluation or Treatment (DC4-663) was not obtained prior to conducting an interview.</p>	<p>MH-9 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-9 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>A comprehensive review of 12 inmate records revealed the following deficiencies:</p> <p>MH-10: In 3 of 8 applicable records, there was no “Refusal of Health Care Services” (DC4-711A) after 3 consecutive medication refusals or 5 in one month.</p> <p>MH-11: In 3 of 6 applicable records, the Abnormal Involuntary Movement Scale (AIMS) was not administered within the required time frames.</p>	<p>MH-10 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-10 will remain open.</p> <p>MH-11 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-11.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 16 outpatient records revealed the following deficiencies:</p> <p>MH-12: In 6 records, a Consent for Mental Health Evaluation or Treatment (DC4-663) was not signed prior to initiation of treatment or renewed annually.</p> <p>MH-13: In 4 records, the Individualized Services Plan (ISP) was not signed by all relevant parties.</p> <p>MH-14: In 4 records, problems were not recorded on the problem list.</p> <p>MH-15: In 4 records, the inmate did not receive services as listed on the ISP.</p>	<p>MH-12, MH-13, MH-14, & MH-15 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-12, MH-13, MH-14, & MH-15 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>RECEPTION</u></p> <p>A comprehensive review of 16 inmate records revealed the following deficiencies:</p> <p>MH-16: In 6 records, intelligence testing was not completed as required.</p> <p>MH-17: In 1 of 1 applicable record, a psychiatric evaluation was not conducted within 24 hours for an inmate with acute psychiatric symptoms.</p>	<p>MH-16 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring was inadequate and a level of compliance could not be determined. MH-16 will remain open.</p> <p>MH-17 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-17.</p>

B. East Unit

The CAP closure files revealed evidence to determine that 0 of 2 mental health findings were corrected. Two mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>INMATE REQUESTS</u></p> <p>MH-1: In 1 of 3 records reviewed, there was no evidence that the inmate request was responded to timely.</p>	<p>MH-1 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-1 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>MH-2: In 1 of 5 applicable records (11 reviewed), there was no evidence that an Individualized Service Plan was completed within 30 days after receiving S2 or S3 grade.</p>	<p>MH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-2 will remain open.</p>

C. South Unit

The CAP closure files revealed evidence to determine that 6 of 8 mental health findings were corrected. Two mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>MH-1: In 1 of 1 applicable records (6 reviewed), the Abnormal Involuntary Movement Scales (AIMS) was not administered within the appropriate time frame.</p>	<p>MH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 5 records revealed the following deficiencies:</p> <p>MH-2: In 1 of 1 applicable record, the inmate was not seen by mental health staff within 14 days of arrival.</p> <p>MH-3: In 1 of 1 applicable record, the Biopsychosocial Assessment (BPSA) was not approved by the Multi-Disciplinary Services Team (MDST) within 30 days of the initiation of mental health services.</p> <p>MH-4: In 1 of 1 applicable record, the Individualized Service Plan (ISP) was not completed within 30 days of the initiation of mental health services.</p> <p>MH-5: In 2 records, the ISP was not individualized.</p> <p>MH-6: In 3 of 4 applicable records, the ISP was not reviewed or revised timely.</p> <p>MH-7: In 1 of 4 applicable records, there was no evidence the inmate received individual counseling at least every 90 days.</p> <p>MH-8: In 1 of 4 applicable records, there was no evidence the inmate received case management services at least every 90 days.</p>	<p>MH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2.</p> <p>MH-3 & MH-4 OPEN</p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-3 & MH-4 will remain open.</p> <p>MH-5, MH-6, MH-7, & MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5, MH-6, MH-7, & MH-8.</p>

IV. Conclusion

Physical Health Main Unit

PH-2 & PH-5 will remain open and all other physical health portions will close.

Physical Health East Unit

Ph-8 will remain open and all other physical health portions will close.

Physical Health South Unit

Ph-1 & PH-2 will remain open and all other physical health portions will close.

Mental Health Main Unit

MH-1, MH-4, MH-6, MH-7, MH-9, MH-10, MH-12, MH-13, MH-14, MH-15, & MH-16 will remain open and all other mental health portions will close.

Mental Health East Unit

MH-1 & MH-2 will remain open and all other mental health portions will close.

Mental Health South Unit

MH-3 & MH-4 will remain open and all other mental health portions will close.

Until appropriate corrective actions are undertaken by 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 on-site visit.