

**ON-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**CHARLOTTE CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted April 16-18, 2019

**CMA STAFF**

Jane Holmes-Cain, LCSW  
Lynne Babchuck, LCSW

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**I. Overview**

On April 16-18, 2019, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Charlotte Correctional Institution (CHACI). The survey report was distributed on May 6, 2019. In June 2019, CHACI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the CHACI 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 Charlotte Correctional Institution**

| CAP # | Request Date for Monitoring Documents | CAP Assessment Date | Assessment Location | Total # Survey Findings | Total # Open Findings | Total # Findings Closed |
|-------|---------------------------------------|---------------------|---------------------|-------------------------|-----------------------|-------------------------|
| 1     | 11/19/19                              | 12/6/19             | On-site             | 15                      | 5                     | 10                      |

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 7 of the 10 physical health findings were corrected. Three 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>Chronic Illness Clinic</u></b><br>PH-1: In 3 records, the diagnosis was not recorded on the problem list.                  | X      |   |   |   |   |
| <b><u>Chronic Illness Clinic</u></b><br>PH-2: In 3 records, there was no evidence the inmate was seen at the required intervals. | 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 |
|---|--------|---|---|---|---|
| <p><b><u>Gastrointestinal Clinic</u></b><br/>           PH-3: In 1 of 3 applicable records, there was no evidence that abnormal labs were addressed in a timely manner.</p>                                 |        | X   |   |   |   |
| <p><b><u>Gastrointestinal Clinic</u></b><br/>           PH-4: In 4 of 14 applicable records, there was no evidence of hepatitis A and/or B vaccination or refusal.</p>                                      | X      |   |   |   |   |
| <p><b><u>Oncology Clinic</u></b><br/>           PH-5: In 1 of 3 records reviewed, there was no evidence of a referral to a specialist when indicated.</p>   | X      |   |   |   |   |
| <p><b><u>Emergency Services</u></b><br/>           PH-6: In 1 of 2 applicable records, there was no evidence of an appropriate assessment for an inmate with potentially life-threatening complaints.</p>   | X      |   |   |   |   |
| <p><b><u>Emergency Services</u></b><br/>           PH-7: In 1 of 1 applicable record, there was no documentation of the date and/or time of the EMS arrival to transport to the outside emergency room.</p> | X      |   |   |   |   |

| <b>Finding</b>   | <b>Closed</b> | <b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met | <b>Open:</b> No episodes were available for review | <b>Open:</b> Institutional monitoring was inadequate | <b>Open:</b> Institutional monitoring indicated compliance was not met |
|--|---------------|--|--|--|--|
| <b><u>Infirmary</u></b><br>PH-8: In 2 records, there was no evidence of a complete discharge note by the nurse.  | <b>X</b>      |  |  |  |  |
| <b><u>Infirmary</u></b><br>PH-9: In 1 of 1 applicable record, there was no evidence of weekly clinician rounds and progress notes for a chronic inpatient. |               |  | <b>X</b>   |  |  |
| <b><u>Medical Inmate Requests</u></b><br>PH-10: In 2 of 7 applicable records (16 reviewed), there was no evidence the response occurred as intended.       |               | <b>X</b>   |  |  |  |

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 3 of the 5 mental health findings were corrected. Two mental health findings will remain open.

| <b>Finding</b>  | <b>Closed</b> | <b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met | <b>Open:</b> No episodes were available for review | <b>Open:</b> Institutional monitoring was inadequate | <b>Open:</b> Institutional monitoring indicated compliance was not met |
|---|---------------|--|--|--|--|
| <p><b><u>Special Housing</u></b><br/> MH-1: In 2 of 10 records reviewed, the initial mental status exam (MSE) was not completed.</p>  |               | X  |  |  |  |
| <p><b><u>Psychological Emergencies</u></b><br/> MH-2: In 2 of 10 records reviewed, not all entries were dated, timed, signed and stamped.</p>   | X             |  |  |  |  |
| <p><b><u>Outpatient Mental Health</u></b><br/> MH-3: In 5 of 18 records reviewed, the Individualized Service Plan (ISP) was not signed by all relevant parties.</p>                                       |               | X  |  |  |  |
| <p><b><u>Outpatient Medication</u></b><br/> MH-4: In 5 of 17 records, the inmates did not receive medications as prescribed or documentation of refusal was not present in the medical record.</p>        | X             |  |  |  |  |
| <p><b><u>Outpatient Medications</u></b><br/> MH-5: In 4 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> | X             |  |  |  |  |

## **IV. Conclusion**

### **Physical Health-Main Unit**

The following physical health findings will close: PH-1, PH-2, PH-4, PH-5, PH-6, PH-7, & PH-8. All other physical health findings will remain open.

### **Mental Health-Main Unit**

The following mental health findings will close: MH-2, MH-4, & MH-5. All other mental health findings will remain open.

Until appropriate corrective actions are undertaken by CHACI 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.