

**SECOND CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**DADE CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted February 11-13, 2025

**CMA STAFF**

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## I. Overview

On February 11-13, 2025, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Dade Correctional Institution (DADCI). The survey report was distributed on March 25, 2025. In April 2025 DADCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the DADCI 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 Dade Correctional Institution

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	8/7/2025	32	11	21
2	12/14/25	11	3	8

## II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 5 of the 6 physical health findings were corrected. One physical health finding remains 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>Inpatient Infirmary Care:</u></b> <b>Screen 2:</b> All orders are received and implemented		X			

<b><u>Confinement Medical Review:</u></b> <b>Screen 3:</b> The inmate is seen in chronic illness clinic as regularly scheduled	<b>X</b>				
<b><u>Consultations:</u></b> <b>Screen 3:</b> The consultation is completed in a timely manner as dictated by the clinical needs of the inmate	<b>X</b>				
<b><u>Medication and Vaccination Administration:</u></b> <b>Screen 3:</b> If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance	<b>X</b>				
<b><u>Periodic Screenings:</u></b> <b>Screen 1:</b> The periodic screening encounter is completed within one month of the due date	<b>X</b>				
<b><u>PREA Medical Review:</u></b> <b>Screen 3:</b> There is documentation that the alleged victim was provided education on STIs	<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, as there were no applicable episodes during the review period.

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>Psychiatric Restraints:</u></b> <b>Screen 2:</b> Less restrictive means of behavioral control are attempted prior to the application of restraints			X		
<b>Screen 13:</b> The inmate is referred to the multi-disciplinary services team (MDST)			X		
<b><u>Outpatient Psychotropic Medication Practices:</u></b> <b>Screen 9:</b> The nurse meets with the inmate if he/she refused psychotropic medication for two consecutive days and referred to the clinician if needed.	X				
<b>Screen 10:</b> The inmate signs DC4-711A "Refusal of Health Care Services" after three consecutive OR five medication refusals in one month.	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>Special Housing:</u></b> <b>Screen 2:</b> Psychotropic medications continue as ordered while inmates are held in special housing	<b>X</b>				

#### **IV. Conclusion**

Until appropriate corrective actions are undertaken by DADCI 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.