

**THIRD 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
3	5/5/25	3	0	3

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that the remaining physical health finding was corrected. All physical health findings are closed.

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
<u>Inpatient Infirmary Care:</u> Screen 2: All orders are received and implemented	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 2 of the 2 mental health findings were corrected. All mental health findings are closed.

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
Psychiatric Restraints: Screen 2: Less restrictive means of behavioral control are attempted prior to the application of restraints	X				
Screen 13: The inmate is referred to the multi-disciplinary services team (MDST)	X				

IV. Conclusion

All findings as a result of the February 2025 survey are closed and no further action is required on this CAP. The CMA appreciates the efforts to improve services and documentation at this institution and continues to encourage ongoing quality improvement activities to ensure that the proper provision of health care services is maintained.