

**FOURTH OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

DADE CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted January 29-31, 2019

CMA STAFF

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I. Overview

On January 29-31, 2019, 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 8, 2019. In April 2019, 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 #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	10/8/19	11/5/19	On-site	66	42	25
2	8/25/20	11/17/20	On-site	42	15	27
3	3/23/21	5/5/21	On-site	15	8	7
4	9/8/21	10/4/21	Off-site	8	1	7

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 5 of the 5 physical health findings were corrected. All physical health findings are closed.

Finding	Closed	Open: Evaluation of records indicated 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>Chronic Illness Clinic</u> PH-1: In 3 records, there was no evidence that inmates were seen at the required intervals.	X				

Finding	Closed	Open: Evaluation of records indicated 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><u>Endocrine Clinic</u> PH-3: In 2 of 10 applicable records, there was no evidence of an annual fundoscopic examination.</p>	X				
<p><u>Gastrointestinal Clinic</u> PH-6: In 3 of 13 applicable records, there was no evidence that inmates were screened for HCC at the required intervals.</p>	X				
<p><u>Sick Call</u> PH-19: In 3 of 6 applicable records, there was no evidence the follow-up appointment with the clinician was completed in a timely manner.</p>	X				
<p><u>Consultations</u> PH-24: In 3 of 4 applicable findings, consultants treatment recommendations were not incorporated into the treatment plan.</p>	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 2 of the 3 mental health findings were corrected. One mental health findings will 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
<p align="center"><u>SHOS</u></p> <p>MH-2: In 4 records, the inmate was not observed at the frequency ordered by the clinician.</p>		X			
<p align="center"><u>Inmate Request</u></p> <p>MH-7: In 1 of 3 applicable records, an interview or referral did not occur as intended in response to an inmate request.</p>	X				
<p align="center"><u>Inpatient Mental Health</u></p> <p>MH-12: In 3 of 8 applicable records, a follow-up risk assessment for violence was not completed within the required time frame.</p>	X				

IV. Conclusion

Physical Health-Main Unit

The following physical health findings will close: PH-1, PH-3, PH-6, PH-19, & PH-24. All other physical health findings will remain open.

Mental Health-Main Unit

The following mental health findings will close: MH-7 & MH-12. All other mental health findings will remain open.

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.