

**ON-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**DESOTO CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted September 6-8, 2016

**CMA STAFF**

Lynne Babchuck, LCSW

CAP Assessment Distributed on June 19, 2017

## CAP Assessment of Desoto Correctional Institution

### I. Overview

On September 6-8, 2016, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Desoto Correctional Institution (DESCI). The survey report was distributed on September 30, 2016. In October 2016, DESC I submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the September 2016 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.

On May 15, 2017, 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 June 7, 2017 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

The CAP closure files revealed sufficient evidence to determine that 9 of the 9 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<p><b><u>CHRONIC ILLNESS CLINIC REVIEW</u></b></p> <p><b>A comprehensive review of 16 records revealed the following deficiencies:</b></p> <p><b>PH-1: In 14 records, the baseline information was incomplete or missing.</b></p> <p><b>PH-2: In 12 records, patient education was incomplete or missing.</b></p> <p><b>PH-3: In 8 records, inmates were not seen at the frequency required by their M-grade status.</b></p>	<p><b>PH-1, PH-2, &amp; PH-3 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1, PH-2, &amp; PH-3.</p>

Finding	CAP Evaluation Outcome
<p><b><u>NEUROLOGY CLINIC</u></b></p> <p><b>PH-4: In 5 of 11 records reviewed, seizures were not classified.</b></p>	<p><b>PH-4 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INFIRMARY</u></b></p> <p><b>PH-5: In 7 of 13 records reviewed, there was no note by the discharge nurse contained in the medical record.</b></p>	<p><b>PH-5 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p>

Finding	CAP Evaluation Outcome
<p><b><u>PERIODIC SCREENINGS</u></b></p> <p><b>A comprehensive review of 16 records revealed the following deficiencies:</b></p> <p><b>PH-6: In 5 records, the periodic screening encounter did not include all necessary components.</b></p> <p><b>PH-7: In 4 records, health education was not documented.</b></p>	<p><b>PH-6 &amp; PH-7 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6 &amp; PH-7.</p>

Finding	CAP Evaluation Outcome
<p><b><u>DENTAL CARE</u></b></p> <p><b>PH-8: In 9 of 18 records reviewed, there was no evidence of an accurate diagnosis and treatment plan.</b></p>	<p><b>PH-8 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><b><u>MEDICATION ADMINISTRATION</u></b></p> <p><b>PH-9: An observation of the pill line indicated that medications were administered by personnel without the required qualifications</b></p>	<p><b>PH-9 CLOSED</b></p> <p>Adequate documentation of correction was provided to close PH-9.</p>

### III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 1 of 7 mental health findings were corrected. Six mental health findings will remain open.

Finding	CAP Evaluation Outcome
<p><b><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></b></p> <p><b>MH-1: In 3 of 7 records reviewed, mental health staff did not provide post-discharge follow up within 7 days.</b></p>	<p><b>MH-1 OPEN</b></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-1 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INMATE REQUESTS</u></b></p> <p><b>MH-2: In 7 of 14 records reviewed, a referral or interview did not occur as intended.</b></p>	<p><b>MH-2 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2.</p>

Finding	CAP Evaluation Outcome
<p><b><u>OUTPATIENT MENTAL HEALTH SERVICES</u></b></p> <p><b>MH-3: In 2 of 8 applicable records, the inmate was not interviewed by mental health staff within 14 days of arrival.</b></p> <p><b>MH-4: In 2 of 3 applicable records, the sex offender screening was not completed.</b></p> <p><b>MH-5: In 5 of 10 applicable records, the Individualized Service Plan (ISP) was not revised at 180 day intervals.</b></p> <p><b>MH-6: In 8 of 11 applicable records, the inmate was not seen for counseling services as indicated on the ISP.</b></p> <p><b>MH-7: In 8 of 11 applicable records, the inmate did not receive case management services as listed on the ISP.</b></p>	<p><b>MH-3 OPEN</b></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-3 will remain open.</p> <p><b>MH-4 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-4 will remain open.</p> <p><b>MH-5, MH-6, &amp; MH-7 OPEN</b></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-5, MH-6, &amp; MH-7 will remain open.</p>

#### IV. Conclusion

All physical health portions will close. Mental health finding MH-2 will close and all other mental health portions will remain open.

Until such time as 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.