

**FIRST CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**EVERGLADES CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted January 9-11, 2024

**CMA STAFF**

Monica Dodrill, RN

Christine Swift, LCSW

Distributed on July 15, 2024

**I. Overview**

On January 9-11, 2024, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Everglades Correctional Institution (EVECI). The survey report was distributed on February 14, 2024. In March 2024, EVECI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the EVECI 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 Everglades Correctional Institution**

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	6/22/2024	21	12	9

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 7 of the 18 physical health findings were corrected. Eleven 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>Gastrointestinal Chronic Illness Clinic:</u></b> <b>Screen 2:</b> There is evidence of an appropriate physical examination		X			
<b><u>General Chronic Illness Clinic:</u></b> <b>Screen 3:</b> The inmate is seen at intervals required for their M-grade or at intervals specified by the clinician		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>Miscellaneous Chronic Illness Clinic:</u></b>  <b>Screen 6:</b> Patients are referred to a specialist for more in-depth treatment as indicated</p>	X				
<p><b><u>Oncology Chronic Illness Clinic:</u></b>  <b>Screen 9:</b> Patients are referred to a specialist for more in-depth treatment as indicated</p>		X			
<p><b><u>Emergency Services:</u></b>  <b>Screen 3:</b> Vital signs including weight are documented</p>	X				
<p><b>Screen 9:</b> Inmates returning from an outside hospital are evaluated by the clinician within one business day</p>		X			
<p><b><u>Outpatient Infirmary Care:</u></b>  <b>Screen 3:</b> The inmate is evaluated within one hour of being placed on observation status</p>	X				
<p><b><u>Inpatient Infirmary Care:</u></b>  <b>Screen 2:</b> All orders are received and implemented</p>	X				
<p><b>Screen 8:</b> A discharge note containing all of the required information is completed as required</p>	X				

<b>Finding</b>	<b>Closed</b>	<b>Open: Evaluation of records indicated an acceptable level of compliance was not met</b>	<b>Open: No episodes were available for review</b>	<b>Open: Institutional monitoring was inadequate</b>	<b>Open: Institutional monitoring indicated compliance was not met</b>
<b><u>Confinement Medical Review:</u></b> <b>Screen 7:</b> New or pending consultations progress as clinically required	X				
<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		X			
<b><u>Medical Inmate Requests:</u></b> <b>Screen 2:</b> The request is responded to within the appropriate time frame	X				
<b>Screen 4:</b> The follow-up to the request occurs as intended		X			
<b><u>Medication And Vaccination Administration:</u></b> <b>Screen 1:</b> The inmate receives medications as prescribed		X			
<b>Screen 4:</b> There is evidence of pneumococcal vaccination or refusal		X			
<b><u>Periodic Screenings:</u></b> <b>Screen 1:</b> The periodic screening encounter is completed within one month of the due date		X			
<b>Screen 2:</b> All components of the screening are completed and documented as required		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>Screen 3:</b> All diagnostic tests are completed prior to the periodic screening encounter		<b>X</b>			

### 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 finding 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
<b><u>Self-Injury and Suicide Prevention Review:</u></b> <b>Screen 1:</b> A thorough clinical assessment is completed prior to placement on Self Harm Observation Status (SHOS)	<b>X</b>				

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>Outpatient Psychotropic Medication Practices:</u></b>  <b>Screen 4:</b> Abnormal lab results required for mental health medications are followed up with appropriate treatment and/or referral in a timely manner</p>	<b>X</b>				
<p><b><u>Outpatient Mental Health Services:</u></b>  <b>Screen 4:</b> A sex offender screening is completed within 60 days of arrival at the permanent institution if applicable</p>					<b>X</b>

#### IV. Conclusion

Until appropriate corrective actions are undertaken by EVECI 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.