SEVENTH OFF-SITE CORRECTIVE ACTION PLAN ASSESSMENT of

EVERGLADES CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey Conducted April 12-14, 2016

<u>CMA STAFF</u>

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CAP Assessment Distributed on August 15, 2018

CAP Assessment of Everglades Correctional Institution

I. Overview

On April 12 - 14, 2016, 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 April 27, 2016. In May 2016, 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 April 2016 survey. These efforts included inservice training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than ninety days.

On August 18, 2016, 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 off-site CAP assessment on September 14, 2016 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 9 of 9 physical health findings and 3 of 4 mental health findings were corrected.

On December 21, 2016, 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 off-site CAP assessment on January 25, 2017. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected.

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 off-site CAP assessment on June 5, 2017. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected.

On August 24, 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 off-site CAP assessment on September 14, 2017. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected.

On December 8, 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 off-site CAP assessment on January 3, 2018. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected.

On April 23, 2018, 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 off-site CAP assessment on May 16, 2018. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected.

On July 24, 2018, 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 off-site CAP assessment on August 14, 2018. 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

All physical health findings are closed.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 1 of 1 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
SELF-HARM OBSERVATION STATUS (SHOS) MH-2: In 2 of 7 records reviewed, the documentation did not indicate the inmate was observed at the frequency ordered by the clinician.	MH-2 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close MH-2.

IV. Conclusion

All findings as a result of the April 2016 survey are closed and no further action is required. 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.