

**FIRST CORRECTIVE ACTION PLAN
ASSESSMENT**

of

FRANKLIN CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted October 17 -19, 2023

CMA STAFF

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I. Overview

On October 17-19, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Franklin Correctional Institution (FRACI). The survey report was distributed on November 14, 2023. In December 2023, FRACI submitted, and the CMA approved the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the FRACI 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 Franklin Correctional Institution

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	2/29/2024	16	3	13

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 13 of the 15 physical health findings were corrected. Two 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
Cardiovascular Chronic Illness Clinic: Screen 5: Abnormal labs are reviewed and addressed in a timely manner	X				
Outpatient Infirmary Care: Screen 2: All orders are received and implemented	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
Screen 3: The inmate is evaluated within one hour of being placed on observation status	X				
Screen 5: Weekend and holiday clinician phone rounds are completed and documented as required	X				
Screen 7: A discharge note containing all of the required information is completed as required	X				
<u>Inpatient Infirmary Care:</u> Screen 2: All orders are received and implemented	X				
Screen 8: A discharge note containing all of the required information is completed as required	X				
<u>Intra-System Transfers:</u> Screen 7: A clinician reviews the health record and DC4-760A within seven (7) days of arrival		X			
<u>Periodic Screenings:</u> Screen 1: The periodic screening encounter is completed within one month of the due date	X				
Screen 2: All components of the screening are completed and documented as required		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
Screen 3: All diagnostic tests are completed prior to the periodic screening encounter	X				
PREA Medical Review: Screen 3: There is documentation that the alleged victim was provided education on STIs	X				
Screen 4: Prophylactic treatment and follow-up care for STIs are given as indicated	X				
Screen 7: A mental health referral is submitted following the completion of the medical screening	X				
Screen 8: The inmate is evaluated by mental health by the next working day	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that one mental health finding was not corrected. One mental health finding 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
<u>Self-Injury and Suicide Prevention</u> <u>Review:</u> Screen 4: The inmate is observed at the frequency ordered by the clinician		X			

IV. Conclusion

Until appropriate corrective actions are undertaken by FRACI 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.