

**FIRST CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**FLORIDA STATE PRISON**

for the

Physical and Mental Health Survey  
Conducted November 2023

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**I. Overview**

In November 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Florida State Prison (FSP). The survey report was distributed on December 27, 2023. In January 2024, FSP submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the FSP 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 Florida State Prison**

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	6/2/2024	17	2	15

**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
<b><u>Cardiovascular Chronic Illness Clinic:</u></b> Screen 4: Annual laboratory work is completed as required	X				
<b><u>Endocrine Clinic Chronic Illness Clinic:</u></b> Screen 2: There is evidence of an appropriate physical examination	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>
Screen 6: A dilated fundoscopic examination is completed yearly for diabetic inmates	<b>X</b>				
<b><u>Gastrointestinal Chronic Illness Clinic:</u></b> Screen 7: There is evidence of hepatitis A and/or B vaccination for inmates with hepatitis C and no evidence of past infection	<b>X</b>				
<b><u>Outpatient Infirmary Care:</u></b> Screen 2: All orders are received and implemented	<b>X</b>				
Screen 4: Patient evaluations are documented at least once every eight hours	<b>X</b>				
Screen 7: A discharge note containing all of the required information is completed as required	<b>X</b>				
<b><u>Consultations:</u></b> Screen 3: The consultation is completed in a timely manner as dictated by the clinical needs of the inmate		<b>X</b>			
<b><u>Periodic Screenings:</u></b> Screen 1: The periodic screening encounter is completed within one month of the due date	<b>X</b>				

<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
Screen 2: All components of the screening are completed and documented as required	X				
Screen 3: All diagnostic tests are completed prior to the periodic screening encounter		X			
Screen 5: All applicable health education is provided	X				
<b>PREA Medical Review:</b> 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				
<b>Dental Care:</b> Screen 11: Consultations or specialty services are completed timely	X				

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 2 of the 2 mental health findings were corrected. All mental health findings are closed.

<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</u></b> <b>Review:</b> Screen 4: The inmate is observed at the frequency ordered by the clinician	<b>X</b>				
Screen 5: Nursing evaluations are completed once per shift	<b>X</b>				

### IV. Conclusion

Until appropriate corrective actions are undertaken by FSP 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 offsite evaluation.