

**ON-SITE CORRECTIVE ACTION PLAN
ASSESSMENT
of
FRANKLIN CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey
Conducted December 10-12, 2019

CMA STAFF

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Distributed on August 27, 2020

I. Overview

On December 10-12, 2019, 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 January 7, 2020. In February 2020, 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 Polk Correctional Institution

CAP #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	6/26/20	8/21/20	Off-site	18	2	16

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 10 of the 11 physical health findings were corrected. One physical health finding remains 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>Cardiovascular Clinic</u> PH-1: In 6 of 18 records reviewed, there was no evidence of pneumococcal vaccination or refusal.	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><u>Miscellaneous Clinic</u> PH-2: In 3 records, there was no evidence the examination was appropriate for the diagnosis.</p>	X				
<p><u>Miscellaneous Clinic</u> PH-3: In 3 records, there was no evidence of the control of the disease and/or the status of the inmate.</p>	X				
<p><u>Neurology Clinic</u> PH-4: In 2 records, there was no evidence that seizures were classified.</p>	X				
<p><u>Neurology Clinic</u> PH-5: In 3 records, there was no evidence of an appropriate examination.</p>	X				
<p><u>Neurology Clinic</u> PH-6: In 2 records, there was no evidence annual labs were completed as required or refused.</p>	X				
<p><u>Dental Clinic</u> PH-7: In 5 of 16 applicable records, there was no evidence of complete and accurate charting.</p>	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
<u>Dental Clinic</u> PH-8: In 1 of 1 applicable record, there was no evidence the consultation was completed in a timely manner.		X			
<u>Consultations</u> PH-9: In 4 of 14 applicable records reviewed, the diagnosis was not recorded on the problem list.	X				
<u>Institutional Tour</u> PH-10: There was no evidence of ensuring privacy at the nurse's station during sick call evaluation.	X				
PH-11: There was no evidence that over the counter (OTC) medication logs were current and/or reconciled.	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 6 of the 7 mental health findings were corrected. One mental health finding remains 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
<p><u>SHOS</u> MH-1: In 2 records, admission orders were not signed/co-signed the next working day.</p>	X				
<p><u>SHOS</u> MH-2: In 3 records, the inmate was not observed at the frequency ordered by the clinician.</p>	X				
<p><u>SHOS</u> MH-3: In 1 of 4 applicable records, there was no evidence of daily rounds by the attending clinician.</p>	X				
<p><u>SHOS</u> MH-4: In 4 records, there was no evidence that the attending clinician conducted a face-to-face evaluation prior to discharge.</p>		X			
<p><u>SHOS</u> MH-5: In 2 records, there was no evidence of adequate post-discharge follow-up by mental health staff within 7 days of discharge.</p>	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
<u>Inmate Requests</u> MH-6: In 3 of 9 applicable records (13 reviewed), an interview or referral did not occur as intended in response to an inmate request.	X				
<u>Special Housing</u> MH-7: In 2 of 2 applicable records (4 reviewed), problems in adjustment were identified without evidence of appropriate response.	X				

IV. Conclusion

Physical Health-Main Unit

PH-8 will remain open and all other physical health findings will close.

Mental Health-Main Unit

MH-4 will remain open and all other mental health findings will close.

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.