

**FOURTH OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

GADSDEN CORRECTIONAL FACILITY

for the

Physical and Mental Health Survey
Conducted July 6-8, 2021

CMA STAFF

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I. Overview

On July 6-8, 2021, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Gadsden Correctional Facility (GCF). The survey report was distributed on August 3, 2021. In September 2021, GCF submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the GCF 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. Item II below describes the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

Summary of CAP Assessments for Gadsden Correctional Facility

CAP #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	3/2/22	3/22/22	Off-site	26	14	12
2	9/2/22	9/27/22	Off-site	14	4	10
3	12/17/22	12/28/22	Off-site	4	3	1
4	8/2/23	8/3/23	Off-site	3	0	3

II. Physical Health Assessment Summary

All physical health findings are closed.

III. Mental Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 3 of the 3 mental health findings were corrected. All mental health findings are closed.

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>SELF-INJURY AND SUICIDE PREVENTION (SHOS)</u></p> <p>MH-1: In one record, the patient was not observed at the frequency ordered by the clinician.</p>	X				
<p>MH-11: In 4 of 15 applicable records, the ISP was not signed by all relevant parties.</p>	X				
<p>MH-12: In 4 of 12 applicable records, the ISP was not reviewed/revised timely.</p>	X				

III. Conclusion

All findings as a result of the July 2021 survey are closed and no further action is required on this CAP. 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.