# **ON-SITE CORRECTIVE ACTION PLAN** ASSESSMENT of

# GADSDEN RE-ENTRY CENTER

for the

Survey Conducted February 14-15, 2018

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CAP Assessment Distributed on September 19, 2018

# CAP Assessment of Gadsden Re-Entry Center

#### I. Overview

On February 14–15, 2018, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Gadsden Re-Entry Center (GADRE). The survey report was distributed on March 8, 2018. On April 4, 2018, GADRE submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the February 2018 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days.

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 on-site CAP assessment on September 7, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. Item II below describes the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

# II. Physical Health Assessment Summary

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

| Finding   | CAP Evaluation Outcome   |
|---|--|
| INTRA-SYSTEM TRANSFERS REVIEW   | PH-1 CLOSED  |
| PH-1: In 4 of 16 records reviewed, the<br>DC4-760A "Health Information<br>Transfer/Arrival Summary" was not<br>completed in its entirety by the receiving<br>institution. | Adequate evidence of in-service<br>training and documentation of<br>correction were provided to close<br>PH-1. |

| Finding   | CAP Evaluation Outcome   |
|---|--|
| PERIODIC SCREENINGS   | PH-2 CLOSED  |
| PH-2: In 3 of 9 records reviewed, there was no evidence that health education was provided. | Adequate evidence of in-service<br>training and documentation of<br>correction were provided to close<br>PH-2. |

| Finding  | CAP Evaluation Outcome   |
|--|--|
| INSTITUTIONAL TOUR   | PH-3 CLOSED  |
| PH-3: Procedures to access sick call were not posted in the dorms. | Adequate documentation of correction was provided to close PH-3. |

# **III. Mental Health Assessment Summary**

There were no mental health findings as a result of the February 2018 survey.

# **IV. Conclusion**

All findings as a result of the February 2018 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.