

**ON-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

GULF CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted January 12 - 14, 2016

CMA STAFF

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CAP Assessment of Gulf Correctional Institution

I. Overview

On January 12-14, 2016, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Gulf Correctional Institution (GULCI). The survey report was distributed on February 11, 2016. In March 2016, GULCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the January 2016 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.

On May 12, 2016, 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 June 14, 2016 to evaluate the effectiveness of corrective actions taken by institutional staff. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

II. Physical Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 6 of the 7 physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>CHRONIC ILLNESS CLINIC RECORD REVIEW</u></p> <p>PH-1: In 6 of 13 records reviewed, baseline information was incomplete or missing.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC</u></p> <p>PH-2: In 4 of 8 records reviewed, there was no evidence that seizures were classified as primary generalized (tonic-clonic, grand mal), primary or simple absence (petit mal), simple partial, or complex partial seizures.</p>	<p>PH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>A comprehensive review of 6 records revealed the following deficiencies:</p> <p>PH-3: In 3 records, the diagnosis was not recorded on the problem list.</p> <p>PH-4: In 2 records, the consultation log was not accurate for the incident.</p>	<p>PH-3 & PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3 & PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS REVIEW</u></p> <p>PH-5: A tour of the dental clinic revealed that necessary equipment was not in proper working order.</p>	<p>PH-5 OPEN</p> <p>The necessary equipment has not been repaired. PH-5 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL CLINIC REVIEW</u></p> <p>PH-6: In 3 of 12 applicable records (18 reviewed), there was no evidence of complete and accurate charting of dental findings.</p>	<p>PH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>PH-7: A tour of the facility revealed there were expired items in the pharmacy and nursing areas.</p>	<p>PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-7.</p>

B. Annex

The CAP closure files revealed sufficient evidence to determine that 16 of the 17 physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>CARDIOVASCULAR CLINIC</u></p> <p>PH-1: In 1 of 1 applicable record (18 reviewed), there was no referral to a specialist although indicated.</p>	<p>PH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1.</p>

Finding	CAP Evaluation Outcome
<p><u>ENDOCRINE CLINIC</u></p> <p>PH-2: In 4 of 9 applicable records (15 reviewed), there was no evidence of the required annual fundoscopic examination.</p>	<p>PH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>A comprehensive review of 13 records revealed the following deficiencies:</p> <p>PH-3: In 1 of 3 applicable records, there was no evidence that an inmate with confirmed or suspected cirrhosis had been screened for hepatocellular carcinoma.</p> <p>PH-4: In 5 of 9 applicable records, there was no evidence of hepatitis B vaccination or refusal.</p> <p>PH-5: In 3 of 11 applicable records, there was no evidence of pneumococcal vaccination or refusal.</p>	<p>PH-3, PH-4, & PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3, PH-4, & PH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC</u></p> <p>A comprehensive review of 11 records revealed the following deficiencies:</p> <p>PH-6: In 7 records, seizures were not classified.</p> <p>PH-7: In 1 of 5 applicable records, there was no evidence of influenza vaccination or refusal.</p>	<p>PH-6 & PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6 & PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>INFIRMARY SERVICES</u></p> <p>A comprehensive review of 12 inmate records revealed the following deficiencies:</p> <p>PH-8: In 3 of 12 inpatient and outpatient records, there was no evidence of a note by the discharge nurse or the discharge note did not contain the required information.</p> <p>PH-9: In 1 of 4 applicable inpatient records, there was no evidence that the admission assessment was completed within the required time frame.</p>	<p>PH-8 & PH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8 & PH-9.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>PH-10: In 6 of 12 records reviewed, the diagnosis was not recorded on the problem list.</p>	<p>PH-10 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10.</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICAL INMATE REQUESTS</u></p> <p>A comprehensive review of 17 inmate records revealed the following deficiencies:</p> <p>PH-11: In 3 records, the response to the inmate request did not address the stated needs.</p> <p>PH-12: In 2 of 8 applicable records, the follow-up to the response did not occur as intended.</p>	<p>PH-11 & PH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11 & PH-12.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS REVIEW</u></p> <p>PH-13: A tour of the dental clinic revealed that the clinic was in disrepair.</p>	<p>PH-13 OPEN</p> <p>Adequate evidence of correction was not provided. PH-13 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL CLINIC REVIEW</u></p> <p>PH-14: In 3 of 15 applicable records (18 reviewed), there was no evidence of the complete and accurate charting of dental findings.</p>	<p>PH-14 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-14.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>A tour of the facility revealed the following deficiencies:</p> <p>PH-15: Medical refrigeration logs were incomplete.</p>	<p>PH-15, PH-16, & PH-17 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-15, PH-16, & PH-17.</p>

Finding	CAP Evaluation Outcome
<p>PH-16: There were expired supplies in the medical treatment areas.</p> <p>PH-17: Over-the-counter medications in the dormitory areas were expired.</p>	

III. Mental Health Assessment Summary

A. Main Unit

There were no findings as a result of the January 2016 survey.

B. Annex

The CAP closure files revealed evidence to determine that 2 of 3 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 7 SHOS admissions revealed the following deficiencies:</p> <p>MH-1: In 2 records, the “Infirmery/Hospital Admission Nursing Evaluation” (DC4-732) was incomplete.</p> <p>MH-2: In 1 of 2 applicable records, the guidelines for SHOS management were not observed.</p> <p>MH-3: In 5 records, there was no evidence the attending clinician conducted a face-to-face evaluation prior to discharge from SHOS.</p>	<p>MH-1 & MH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1 & MH-2.</p> <p>MH-3 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-3 will remain open.</p>

IV. Conclusion

Physical Health Main Unit

The following physical health finding will remain open: PH-5. All other physical health portions will close.

Physical Health Annex

The following physical health finding will remain open: PH-13. All other physical health portions will close.

Mental Health Main Unit

There were no findings as a result of the January 2016 survey.

Mental Health Annex

The following mental health finding will remain open: MH-3. All other mental health portions will close.

Until such time as appropriate corrective actions are undertaken by 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 visit, but the option remains open to conduct an on-site evaluation.