

**OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

GULF CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted August 10-12, 2021

CMA STAFF

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I. Overview

On August 10-12, 2021, 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 September 21, 2021. In October 2021, 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 GULCI 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 Gulf Correctional Institution

CAP #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	3/2/22	3/24/22	Off-site	12	5	7

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 2 of the 5 physical health findings were corrected. Three physical health findings will 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
<p><u>CONSULTATIONS</u></p> <p>PH-1: In 3 records, there was no evidence the consultation was completed in a timely manner.</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
PH-2: In 2 of 7 records, the diagnosis was not recorded on the problem list.	X				
<p><u>INTRA-SYSTEM TRANSFERS</u></p> <p>PH-3: In 1 of 5 applicable records, there was no evidence passes were reviewed and continued as required</p>		X			
PH-4: In 6 records, there was no evidence the clinician reviewed the health record within 7 days of arrival.		X			
<p><u>PERIODIC SCREENINGS</u></p> <p>PH-5: In 4 of 17 records reviewed, there was no evidence that diagnostic tests were completed as required</p>	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 5 of the 7 mental health findings were corrected. Two mental health findings will 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
<p><u>SELF-INJURY AND SUICIDE PREVENTION (SHOS)</u></p> <p>MH-1: In 1 of 3 records reviewed, guidelines for SHOS management were not observed.</p>	X				
<p><u>INMATE REQUESTS</u></p> <p>MH-2: In 4 records, the response to the identified request was not direct, specific and/or did not address the stated need.</p>		X			
<p>MH-3: In 6 records, an interview or referral did not occur as intended in response to an inmate request.</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
<p align="center"><u>OUTPATIENT MENTAL HEALTH</u></p> <p>MH-4: In 7 records, the Individualized Service Plan (ISP) was not signed by all relevant parties.</p>	X				
<p>MH-5: In 4 records, identified problems were not recorded on the problem list.</p>	X				
<p><u>MENTAL HEALTH SYSTEMS REVIEW</u></p> <p>MH-6: There was no evidence that the Multi-disciplinary Service Team (MDST) meets with sufficient frequency for treatment planning.</p>	X				
<p>MH-7: SHOS/IMR does not meet safety guidelines</p>	X				

IV. Conclusion

Physical Health-Main Unit

The following physical health findings will close: PH-2 & PH-5. All other physical health findings will remain open.

Mental Health-Main Unit

The following mental health findings will close: MH-1, MH-4, MH-5, MH-6 & MH-7. All other mental health findings will remain open.

Until appropriate corrective actions are undertaken by GULCI 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.