

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

for the

Physical and Mental Health Survey
Conducted May 6 - 7, 2015

CMA STAFF

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CAP Assessment of Hamilton Correctional Institution

I. Overview

On May 6-7, 2015, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Hamilton Correctional Institution (HAMCI). The survey report was distributed on May 26, 2015. In June 2015, HAMCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the May 2015 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 October 2, 2015, 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 October 28, 2015 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 12 of the 12 physical health findings were corrected. All physical health findings are now closed.

Finding	CAP Evaluation Outcome
<p><u>CHRONIC ILLESS CLINIC REVIEW</u></p> <p>PH-1: In 4 of 17 records reviewed, the 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>ENDOCRINE CLINIC</u></p> <p>A comprehensive review of 10 inmate records revealed the following deficiencies:</p> <p>PH-2: In 2 of 2 applicable records, abnormal laboratory/diagnostic results were not addressed timely.</p> <p>PH-3: In 2 records, the evaluation of the control of the disease was inadequate.</p>	<p>PH-2 & PH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2 & PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>MISCELLANEOUS CLINIC</u></p> <p>PH-4: In 1 of 1 applicable record (5 reviewed), there was no referral to a specialist although indicated.</p>	<p>PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>RESPIRATORY CLINIC</u></p> <p>PH-5: In 7 of 13 records reviewed, reactive airways diseases were not classified.</p>	<p>PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>A comprehensive review of 13 inmate records revealed the following deficiencies:</p> <p>PH-6: In 2 of 9 applicable records, the consultant's treatment recommendations were not incorporated into the treatment plan.</p> <p>PH-7: In 2 of 8 applicable records, follow-up appointments and/or diagnostic testing were not completed timely.</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>MEDICAL INMATE REQUESTS</u></p> <p>PH-8: In 2 of 9 applicable records (14 reviewed), there was no evidence that the response occurred as intended.</p>	<p>PH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>PERIODIC SCREENINGS</u></p> <p>PH-9: In 1 of 1 applicable record (16 reviewed); the inmate was not referred to the clinician.</p>	<p>PH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS</u></p> <p>PH-10: A tour of the dental facility revealed that necessary equipment was not in proper working order.</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>INSTITUTIONAL TOUR</u></p> <p>PH-11: Over-the-counter medication counts were inaccurate in four dormitories.</p>	<p>PH-11 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-11.</p>

Finding	CAP Evaluation Outcome
<p><u>OTHER ADMINISTRATIVE ISSUES</u></p> <p>PH-12: Inmates were not enrolled or not enrolled timely in the proper Chronic Illness Clinic.</p>	<p>PH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-12.</p>

B. Annex

The CAP closure files revealed sufficient evidence to determine that 7 of the 8 physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC</u></p> <p>A comprehensive review of 16 records revealed the following deficiencies:</p> <p>PH-1: In 4 records, there was no evidence of an annual urinalysis.</p> <p>PH-2: In 4 of 14 applicable records, there was no evidence that hepatitis A & B vaccines were given to inmates with hepatitis C infection and no prior history of A & B infection.</p> <p>PH-3: In 2 of 2 applicable records, there was no referral to a specialist when indicated.</p>	<p>PH-1, PH-2, & PH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-1, PH-2, & PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC</u></p> <p>PH-4: In 5 of 15 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-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>RESPIRATORY CLINIC</u></p> <p>PH-5: In 7 of 13 applicable records (16 reviewed), there was no evidence that reactive airway disease was classified as mild, moderate, or severe.</p>	<p>PH-5 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-5 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>SICK CALL</u></p> <p>PH-6: In 2 of 6 applicable records (18 reviewed), the clinician orders were inadequate.</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>CONSULTATIONS</u></p> <p>PH-7: In 12 of 16 records reviewed, the diagnosis was not reflected on the problem list.</p>	<p>PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>DENTAL SYSTEMS</u></p> <p>PH-8: A tour of the dental clinic revealed that necessary equipment was not in proper working order.</p>	<p>PH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed evidence to determine that 8 of 8 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 10 outpatient records revealed the following deficiencies:</p> <p>MH-1: In 4 of 5 applicable records, the DC4-760A “Health Information Arrival/Transfer Summary” was incomplete.</p> <p>MH-2: In 2 records, the S-grade in Offender Based Information System (OBIS) did not match the S-grade documented in the medical record.</p> <p>MH-3: In 3 of 6 applicable records, the mental health screening evaluation was not completed within 14 days of arrival.</p> <p>MH-4: In 4 of 5 applicable records, the biopsychosocial assessment (BPSA) was not approved by the Multi-disciplinary Service Team (MDST) within 30 days.</p> <p>MH-5: In 4 of 5 applicable records, the initial ISP (Individualized Service Plan) was not completed within 30 days of initiating mental health services.</p> <p>MH-6: In 6 records, the ISP was not signed by the inmate or a refusal was not documented on form DC4-711A.</p> <p>MH-7: In 2 records, mental health problems were not listed on the problem list.</p> <p>MH-8: In 2 records, inmates were not seen for counseling and/or case management as listed on the ISP.</p>	<p>MH-1, MH-2, MH-3, MH-4, MH-5, MH-6, MH-7, & MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1, MH-2, MH-3, MH-4, MH-5, MH-6, MH-7, & MH-8.</p>

B. Annex

The CAP closure files revealed evidence to determine that 6 of 9 mental health findings were corrected. Three mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 10 SHOS admissions revealed the following deficiencies:</p> <p>MH-1: In 3 records, an emergency evaluation was not completed by mental health or nursing staff prior to an SHOS admission.</p> <p>MH-2: In 6 of 7 applicable records, the guidelines for SHOS management were not observed.</p> <p>MH-3: In 2 records, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p> <p>MH-4: In 7 records, mental health staff did not provide post-discharge follow-up within 7 days.</p>	<p>MH-1 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1.</p> <p>MH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. MH-2 will remain open.</p> <p>MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-3.</p> <p>MH-4 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. MH-4 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>INMATE REQUESTS</u></p> <p>MH-5: In 6 of 7 records, a copy of the inmate request form was not present.</p>	<p>MH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5.</p>

Finding	CAP Evaluation Outcome
<p><u>SPECIAL HOUSING</u></p> <p>MH-6: In 2 of 6 records (8 reviewed), the mental status exam (MSE) was not in the medical record or not completed within the required time frame.</p>	<p>MH-6 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. MH-6 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH</u></p> <p>A comprehensive review of 12 outpatient records revealed the following deficiencies:</p> <p>MH-7: In 3 of 9 applicable records, the mental health screening evaluation was not completed within 14 days of arrival.</p> <p>MH-8: In 7 records, the ISP was not signed by the inmate or a refusal was not documented on form DC4-711A.</p>	<p>MH-7 & MH-8 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-7 & MH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>MENTAL HEALTH SYSTEMS</u></p> <p>MH-9: The procedure for inmates requesting mental health services was inadequate.</p>	<p>MH-9 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-9.</p>

IV. Conclusion

Physical Health Main Unit

All physical health portions will close.

Physical Health Annex

PH-5 will remain open and all other physical health portions will close.

Mental Health Main Unit

All mental health portions will close.

Mental Health Annex

MH-2, MH-4, & MH-6 will remain open and all other mental health portions will close.

Until such time as appropriate corrective actions are undertaken by HAMCI 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.