

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

of

JEFFERSON CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted August 24-26, 2021

CMA STAFF

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I. Overview

On August 24-26, 2021, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Jefferson Correctional Institution (JEFCI). The survey report was distributed on September 21, 2021. In October 2021, JEFCI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the JEFCI 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 Jefferson 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	3/24/22	Off-site	20	10	10
2	8/1/22	8/30/22	Off-site	10	4	6

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 5 of the 6 physical health findings were corrected. One physical health finding 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
<u>GASTROINTESTINAL CLINIC</u> PH-2: In 6 of 15 records reviewed, there was no evidence of hepatitis A and/or hepatitis B vaccination or refusal with a history of hepatitis C.	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><u>IMMUNITY CLINIC</u></p> <p>PH-3: In 4 of 11 records reviewed, there was no evidence recombinant hepatitis B vaccine was given to inmates who have HIV infection and no evidence of past hepatitis B infection.</p>	X				
<p>PH-5: In 2 records, there was no evidence of influenza vaccination or refusal.</p>	X				
<p><u>RESPIRATORY CLINIC</u></p> <p>PH-7: In 3 of 14 records reviewed, reactive airway diseases were not classified as mild, moderate, or severe.</p>	X				
<p><u>INTRA-SYSTEM TRANSFERS</u></p> <p>PH-9: In 3 of 12 records reviewed, there was no evidence the health record and "Health Information Transfer/Arrival Summary" (DC4-760A) were reviewed by a clinician within 7 days of arrival</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><u>PERIODIC SCREENINGS</u></p> <p>PH-10: In 3 of 12 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 1 of the 4 mental health findings were corrected. Three 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 record, there was no evidence of a thorough assessment prior to placement in SHOS.</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
MH-2: In 2 records, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.		X			
MH-3: In 1 record, the Individualized Service Plan (ISP) was not revised within 14 days of discharge.		X			
<p style="text-align: center;"><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></p> <p>MH-6: In 5 records, the inmate did not receive medications as prescribed, or documentation of refusal was not present in the medical record.</p>		X			

IV. Conclusion

Physical Health-Main Unit

The following physical health findings will close: PH-2, PH-3, PH-5, PH-7, & PH-9. All other physical health findings will remain open.

Mental Health-Main Unit

The following mental health findings will close: MH-1. All other mental health findings will remain open.

Until appropriate corrective actions are undertaken by JEFCl 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.