

**FIRST CORRECTIVE ACTION PLAN
ASSESSMENT**
of
LAKE CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted October 2023

CMA STAFF

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Distributed on June 5, 2024

I. Overview

In October, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Lake Correctional Institution (LAKCI). The survey report was distributed on November 15, 2023. In December 2023, LAKCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the LAKCI 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 X Correctional Institution

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	5/20/2024	25	5	20

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 10 of the 14 physical health findings were corrected. Four physical health findings 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>Endocrine Clinic Chronic Illness Clinic:</u> Screen 2: There is evidence of an appropriate physical examination	X				
Screen 7: Inmates with HgbA1c over 8% are seen at least every 90 days	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
<u>Gastrointestinal Chronic Illness Clinic:</u> Screen 7: There is evidence of hepatitis A and/or B vaccination for inmates with hepatitis C and no evidence of past infection	X				
<u>Immunity Chronic Illness Clinic:</u> Screen 2: There is evidence of an appropriate physical examination.		X			
<u>Emergency Services:</u> Screen 3: Vital signs including weight are documented	X				
<u>Outpatient Infirmary Care:</u> Screen 4: Patient evaluations are documented at least once every eight hours	X				
<u>Inpatient Infirmary Care:</u> Screen 2: All orders are received and implemented Screen 4: A Morse Fall Scale is completed at the required intervals	X	X			
Screen 8: A discharge note containing all of the required information is completed as required	X				
<u>Periodic Screenings:</u> Screen 2: All components of the screening are completed and documented as required		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
Screen 3: All diagnostic tests are completed prior to the periodic screening encounter		X			
Screen 5: All applicable health education is provided	X				
PREA Medical Review: Screen 7: A mental health referral is submitted following the completion of the medical screening	X				
Screen 8: The inmate is evaluated by mental health by the next working day	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 10 of the 11 mental health findings were corrected. One mental 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>Self-Injury and Suicide Prevention</u> <u>Review:</u> Screen 5: Nursing evaluations are completed once per shift		X			
Screen 6: There is evidence of daily rounds by the attending clinician	X				
<u>Inpatient Psychotropic Medication</u> <u>Practices:</u> Screen 8: The inmate receives medication(s) as prescribed	X				
Screen 10: The inmate signs DC4-711A "Refusal of Health Care Services" after 3 consecutive OR 5 medication refusals in one month	X				
<u>Inpatient Mental Health Services:</u> Screen 5: For new admissions, vital signs are taken daily for 2 days	X				
Screen 23: Vital signs are recorded by nursing staff at required intervals	X				
Screen 24: Weight is recorded by nursing staff at required intervals	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
<u>Outpatient Psychotropic Medication Practices:</u> Screen 5: Appropriate follow-up laboratory studies are ordered and conducted as required.	X				
Screen 8: The inmate receives medication(s) as prescribed	X				
Screen 9: The nurse meets with the inmate if he/she refused psychotropic medication for two consecutive days and referred to the clinician if needed.	X				
Screen 10: The inmate signs DC4-711A "Refusal of Health Care Services" after three consecutive OR five medication refusals in one month.	X				

IV. Conclusion

Until appropriate corrective actions are undertaken by LAKCI 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 offsite evaluation.