

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

of

LAKE CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted February 27–March 1, 2018

CMA STAFF

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CAP Assessment Distributed on January 11, 2021

CAP Assessment of Lake Correctional Institution

I. Overview

On February 27–March 1, 2018, 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 March 30, 2018. In April 2018, 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 February 2018 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days.

On July 24, 2018, 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 August 28, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure items revealed sufficient evidence to determine that 24 of 30 physical health findings and 20 of 31 mental health findings were corrected.

On November 9, 2018, 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 December 6, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure items revealed sufficient evidence to determine that 6 of 6 physical health findings and 5 of 11 mental health findings were corrected.

On July 26, 2019, 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 August 9, 2019 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 4 of 6 mental health findings were corrected.

On June 26, 2020, 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 off-site CAP assessment on July 29, 2020 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 1 of 2 mental health findings were corrected.

On December 8, 2020, 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 off-site CAP assessment on January 7, 2021 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

All physical health findings were closed at the second CAP assessment.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 1 of 1 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>INPATIENT MENTAL HEALTH SERVICES</u></p> <p>MH-27: In 13 of 17 records reviewed, the required hours of planned structured therapeutic services were not provided.</p>	<p>MH-27 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-27.</p>

IV. Conclusion

All findings as a result of the February 2018 survey are closed and no further action is required on this CAP. The CMA appreciates the efforts to improve services and documentation at this institution and continues to encourage ongoing quality improvement activities to ensure that the proper provision of health care services is maintained.