

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

for the

Physical and Mental Health Survey
Conducted May 9-11, 2017

CMA STAFF

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CAP Assessment of Lancaster Correctional Institution

I. Overview

On May 9-11, 2017, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Lancaster Correctional Institution (LANCI). The survey report was distributed on June 5, 2017. In July 2017, LANCI 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 2017 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 November 19, 2017, 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 November 30, 2017 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

The CAP closure files revealed sufficient evidence to determine that 9 of the 12 physical health findings were corrected. Three physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>CARDIOLOGY CLINIC RECORD REVIEW</u></p> <p>PH-1: In 3 of 13 applicable records (18 reviewed), there was no evidence that abnormal labs were addressed in a timely manner.</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 RECORD REVIEW</u></p> <p>PH-2: In 1 of 3 applicable records (11 reviewed), inmates with HgbA1c over 8.0 were not seen every three months as required.</p>	<p>PH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2.</p>

Finding	CAP Evaluation Outcome
<p><u>GASTROINTESTINAL CLINIC RECORD REVIEW</u></p> <p>PH-3: In 3 of 11 applicable records (12 reviewed), there was no evidence of hepatitis A vaccination or refusal.</p>	<p>PH-3 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-3 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC RECORD REVIEW</u></p> <p>PH-4: In 2 of 9 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>ONCOLOGY CLINIC RECORD REVIEW</u></p> <p>A comprehensive review of 1 record revealed the following deficiencies:</p> <p>PH-5: In 1 record, there was no evidence that an appropriate examination was completed.</p> <p>PH-6: In 1 record, there was no evidence of influenza vaccination or refusal.</p>	<p>PH-5 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p> <p>PH-6 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-6 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>RESPIRATORY CLINIC RECORD REVIEW</u></p> <p>PH-7: In 2 of 10 applicable records (12 reviewed), there was no evidence that reactive airway disease was classified as mild, moderate, or severe.</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>CONSULTATIONS RECORD REVIEW</u></p> <p>PH-8: In 5 of 17 records reviewed, the diagnosis was not recorded on the problem list.</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>INTRASYSTEM TRANSFERS RECORD REVIEW</u></p> <p>PH-9: In 3 of 13 records reviewed, vital signs did not include weight.</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>PERIODIC SCREENINGS</u></p> <p>PH-10: In 3 of 8 records reviewed, there was no evidence that all diagnostic tests were completed as required.</p>	<p>PH-10 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. PH-10 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>MEDICAL INMATE REQUESTS</u></p> <p>PH-11: In 4 of 17 records reviewed, there was no evidence of an incidental note regarding the inmate request.</p>	<p>PH-11 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>A tour of the facility revealed the following deficiencies:</p> <p>PH-12: Over-the-counter medications were not readily available or dispensed correctly in all dorms.</p>	<p>PH-12 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-12.</p>

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 2 of 3 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>MH-1: The guidelines for SHOS management were not observed.</p>	<p>MH-1 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-1 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>MH-2: Psychotropic medications were not continued as ordered while the inmate was in special housing.</p> <p>MH-3: Physician's orders were incomplete.</p>	<p>MH-2 & MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2 and MH-3.</p>

IV. Conclusion

Three physical health findings remain open and all other portions will close. One mental health finding will remain open and all other portions will close.

Until such time as appropriate corrective actions are undertaken by 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, but the option remains open to conduct an on-site visit.