

**OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

LAWTEY CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted October 10-12, 2017

CMA STAFF

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CAP Assessment Distributed on April 23, 2018

CAP Assessment of Lawtey Correctional Institution

I. Overview

On October 10-12, 2017, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Lawtey Correctional Institution (LAWCI). The survey report was distributed on November 6, 2017. In December 2017, LAWCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the October 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 March 23, 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 off-site CAP assessment on April 16, 2018 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 8 of the 9 physical health findings were corrected. One physical health finding will remain open.

Finding	CAP Evaluation Outcome
<u>CHRONIC ILLNESS CLINIC REVIEW</u> PH-1: In 6 of 16 records reviewed, the clinician's documentation was not legible.	PH-1 OPEN Adequate evidence of in-service training was provided, however institutional monitoring was inadequate and the level of compliance could not be determined. PH-1 will remain open.

Finding	CAP Evaluation Outcome
<u>GASTROINTESTINAL CLINIC</u> PH-2: In 6 of 13 applicable records (15 reviewed), there was no evidence of hepatitis A & B vaccination or refusal.	PH-2 CLOSED Adequate evidence of in-service training and documentation of correction was provided to close PH-2.

Finding	CAP Evaluation Outcome
<p><u>NEUROLOGY CLINIC</u></p> <p>PH-3: In 2 of 6 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 seizures, or complex partial seizures.</p>	<p>PH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction was provided to close PH-3.</p>

Finding	CAP Evaluation Outcome
<p><u>SICK CALL</u></p> <p>PH-4: In 3 of 15 applicable records (17 reviewed), there was no evidence that a referral to a higher level of care was made when required.</p>	<p>PH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction was provided to close PH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>INFIRMARY</u></p> <p>A comprehensive review of 17 records revealed the following deficiencies:</p> <p>PH-5: In 3 of 12 applicable records, the “Infirmatory Outpatient Admission-23 Hour Observation Nurses Note” form (DC4-732B) was incomplete or missing.</p> <p>PH-6: In 3 of 12 applicable records, there was no evidence of a complete nursing discharge note.</p>	<p>PH-5 & PH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction was provided to close PH-5 & PH-6.</p>

Finding	CAP Evaluation Outcome
<p><u>CONSULTATIONS</u></p> <p>PH-7: In 5 of 17 records reviewed, the diagnosis was not recorded on the problem list.</p>	<p>PH-7 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction was provided to close PH-7.</p>

Finding	CAP Evaluation Outcome
<p><u>INSTITUTIONAL TOUR</u></p> <p>A tour of the facility revealed the following deficiency:</p> <p>PH-8: Over-the-counter medications were not dispensed correctly in all dorms.</p>	<p>PH-8 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><u>ADMINISTRATIVE ISSUES</u></p> <p>PH-9: The current system to access sick call services was inadequate.</p>	<p>PH-9 CLOSED</p> <p>Adequate documentation of correction was provided to close PH-9.</p>

III. Mental Health Assessment Summary

There were no mental health findings as a result of the October 2017 survey.

IV. Conclusion

Physical health finding PH-1 will remain open and all other physical health portions will close. There were no mental health findings as a result of the October 2017 survey.

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 visit, but the option remains open to conduct an on-site evaluation.