

**ON-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

LIBERTY CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted March 11 – 12, 2015

CMA STAFF

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CAP Assessment Distributed on December 14, 2015

CAP Assessment of Liberty Correctional Institution

I. Overview

On March 11-12, 2015, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Liberty Correctional Institution (LIBCI). The survey report was distributed on March 30, 2015. In April 2015, LIBCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the March 2015 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 July 6, 2015, 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 July 31, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 10 of 15 physical health findings and 5 of 8 mental health findings were corrected.

On November 2, 2015, CMA staff requested access to monitoring documents to assist in determining if an off-site or on-site assessment should be conducted. Based on the documents provided, CMA staff conducted an on-site assessment on December 9, 2015 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 5 of the 5 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<u>CHRONIC ILLNESS CLINIC RECORD REVIEW</u> PH-1: In 4 of 15 records reviewed, baseline data was incomplete or missing.	PH-1 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-1.

Finding	CAP Evaluation Outcome
<p><u>CARDIOVASCULAR CLINIC</u></p> <p>PH-2: In 5 of 18 records reviewed, there was no evidence of influenza vaccine or refusal.</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>ENDOCRINE CLINIC</u></p> <p>PH-4: In 5 of 17 records reviewed, there was no evidence of influenza vaccine or refusal.</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>PERIODIC SCREENINGS</u></p> <p>PH-9: In 4 of 15 records reviewed, the periodic screening did not include all required elements.</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>INSTITUTIONAL TOUR</u></p> <p>PH-15: There was water on the floor in I-dorm in the entry area as well as in the exam room.</p>	<p>PH-15 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-15.</p>

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 3 of 3 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>A comprehensive review of 10 SHOS admissions revealed the following deficiencies:</p> <p>MH-1: In 2 of 4 applicable records, the guidelines for SHOS management were not observed.</p> <p>MH-2: In 9 records, the documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p> <p>MH-3: In 2 records, the DC4-673B “Inpatient Mental Health Daily Nursing Evaluation” was not completed once per shift.</p>	<p>MH-1, MH-2, & MH-3 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1, MH-2, & MH-3.</p>

IV. Conclusion

All physical and mental health findings are closed, and all outstanding issues related to the CMA survey of LIBCI are adequately resolved. No further action is required.