

**FIRST CORRECTIVE ACTION PLAN
ASSESSMENT**

of

LOWELL ANNEX

for the

Physical and Mental Health Survey
Conducted May 16-18, 2023

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Distributed on December 12, 2023

I. Overview

On May 16-18, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Lowell Annex (LOWAN). The survey report was distributed on July 14, 2023. In August 2023, LOWAN submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the LOWAN 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 Lowell Annex

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	12.7-8.2023	63	31	32

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 18 of the 40 physical health findings were corrected. Twenty-two 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
Endocrine Clinic Chronic Illness Clinic: Screen 5: Abnormal labs are reviewed and addressed in a timely manner		X			
Screen 7: Inmates with HgbA1c over 8% are seen at least every 90 days		X			
Screen 10: Medications appropriate for the diagnosis are prescribed		X			
Screen 11: Patients are receiving insulin as prescribed		X			
Gastrointestinal Chronic Illness Clinic: Screen 7: There is evidence of hepatitis A and/or B vaccination for inmates with hepatitis C and no evidence of past infection		X			
Screen 13: Laboratory testing for inmates undergoing hepatitis treatment is completed at the required intervals	X				

General Chronic Illness Clinic: Screen 3: The inmate is seen at intervals required for their M-grade or at intervals specified by the clinician		X			
Immunity Chronic Illness Clinic: Screen 2: There is evidence of an appropriate physical examination.	X				
Screen 10: There is evidence of hepatitis B vaccination for inmates with no evidence of past infection	X				
Oncology Chronic Illness Clinic: Screen 2: There is evidence of an appropriate physical examination		X			
Respiratory Chronic Illness Clinic: Screen 4: A peak flow reading is recorded at each visit	X				
Tuberculosis Chronic Illness Clinic: Screen 4: There is evidence of monthly nursing follow-up		X			
Screen 10: The inmate receives TB medications as prescribed		X			
Screen 11: The inmate is seen by the clinician at the completion of therapy			X		
Emergency Services: Screen 3: Vital signs including weight are documented		X			
Outpatient Infirmary Care: Screen 2: All orders are received and implemented	X				
Screen 4: Patient evaluations are documented at least once every eight hours	X				

Screen 5: Weekend and holiday clinician phone rounds are completed and documented as required	X				
Inpatient Infirmary Care: Screen 2: All orders are received and implemented	X				
Screen 4: A Morse Fall Scale is completed at the required intervals		X			
Screen 5: Nursing assessments are completed at the required intervals	X				
Screen 6: Clinician rounds are completed and documented as required		X			
Screen 7: Weekend and holiday clinician phone rounds are completed and documented as required		X			
Screen 8: A discharge note containing all of the required information is completed as required		X			
Confinement Medical Review: Screen 1: The Pre-Special Housing Health Evaluation is complete and accurate	X				
Screen 2: All medications are continued as prescribed while in the inmate is held in special housing	X				
Consultations: Screen 3: The consultation is completed in a timely manner as		X			

dictated by the clinical needs of the inmate					
Screen 6: All appointments for medical follow-up and/or diagnostic testing are completed as per the consultant's recommendations		X			
Medication And Vaccination Administration: Screen 1: The inmate receives medications as prescribed		X			
Screen 3: If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance	X				
Intra-System Transfers: Screen 7: A clinician reviews the health record and DC4-760A within seven (7) days of arrival		X			
Periodic Screenings: Screen 2: All components of the screening are completed and documented as required		X			
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 1: The Alleged Sexual Battery Protocol is completed in its entirety	X				

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			
<u>Institutional Tour</u> Institutional Tour – Infirmary: Screen 5: Medical isolation room(s) have negative air pressure relative to other parts of the facility	X				
Institutional Tour - Inmate Housing Areas: Screen 4: Over-the-counter medications are available and logged	X				
Screen 5: Procedures to assess medical and dental sick call are posted in a conspicuous place	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 14 of the 23 mental health findings were corrected. Nine mental health findings 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
Self-Injury and Suicide Prevention Review: Screen 1: A thorough clinical assessment is completed prior to placement on Self Harm Observation Status (SHOS)	X				
Screen 2: The nursing evaluation is completed within 2 hours of admission	X				
Screen 4: The inmate is observed at the frequency ordered by the clinician		X			
Screen 5: Nursing evaluations are completed once per shift	X				
Screen 10: The Individualized Services Plan (ISP) is revised within 14 days of discharge	X				

Outpatient Psychotropic Medication: 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 15: Abnormal Involuntary Movement Scale (AIMS) are completed at the required intervals	X				
Screen 17: The use of the ETO is accompanied by a physician's order specifying the medication as an ETO.	X				
Discharge Planning: Screen 1: Aftercare plans are addressed for inmates within 180 days of End of Sentence (EOS)	X				
Screen 3: Appropriate patient care summaries are completed within 30 days of EOS		X			
Screen 4: Staff assist inmates in applying for Social Security benefits 30-45 days prior to EOS	X				
Mental Health Inmate Request: Screen 2: The request is responded to within the appropriate time frame	X				

Special Housing: Screen 1: The pre-confinement examination is completed prior to placement in special housing	X				
Screen 2: Psychotropic medications continue as ordered while inmates are held in special housing	X				
Outpatient Mental Health Services: Screen 2: The inmate is interviewed by mental health staff within 14 days of arrival		X			
Screen 3: Documentation includes an assessment of mental status, the status of mental health problems, and an individualized service plan (ISP) update		X			
Screen 10: The BPSA is approved by the treatment team within 30 days of initiation of mental health services		X			
Screen 11: If mental health services are initiated at this institution, the initial ISP is completed within 30 days		X			
Screen 16: The ISP is signed by the inmate and all members of the treatment team		X			
Screen 17: The ISP is reviewed and revised at least every 180 days		X			
Screen 20: There is evidence the inmate received the mental health services described in the ISP	X				

Screen 30: The frequency of clinical contacts is sufficient	X				
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IV. Conclusion

Until appropriate corrective actions are undertaken by LOWAN 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.