

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

of

**MARION CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
August 16-18, 2022

**CMA STAFF**

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**I. Overview**

On August 16-18, 2022, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Marion Correctional Institution (MARCI). The survey report was distributed on September 27, 2022. In October 2022, MARCI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the MARCI 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 Marion Correctional Institution**

CAP #	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	6/8/2023	Off-site	26	10	16
2	9/25/23	Off-site	10	4	6
3	1/21/24	Off-site	4	0	4

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 4 of the 4 physical health findings were corrected. All physical health findings are closed.

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
<b>General Chronic Illness Clinic</b> Screen 3: The inmate is seen at intervals required for their M-grade or at intervals specified by the clinician.	X				

<b>Finding</b>	<b>Closed</b>	<b>Open: Evaluation of records indicated an acceptable level of compliance was not met</b>	<b>Open: No episodes were available for review</b>	<b>Open: Institutional monitoring was inadequate</b>	<b>Open: Institutional monitoring indicated compliance was not met</b>
<b><u>Medication And Vaccination Administration</u></b> Screen 4: There is evidence of pneumococcal vaccination or refusal.	<b>X</b>				
<b><u>Intra-System Transfers</u></b> Screen 7: A clinician reviewed the health record and DC4-760A within seven (7) days of arrival.	<b>X</b>				
<b><u>Periodic Screenings</u></b> Screen 3: All diagnostic tests are completed prior to the periodic screening encounter.	<b>X</b>				

### III. Conclusion

All findings as a result of the August 2022 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.