

**SECOND CORRECTIVE ACTION PLAN  
ASSESSMENT  
of  
MOORE HAVEN CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted April 17-18, 2024

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## I. Overview

On April 17-18, 2024, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Moore Haven Correctional Facility (MHCF). The survey report was distributed on May 31, 2024. In June 2024, MHCF submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the MHCF 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 Moore Haven Correctional Facility

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	12/11/2024	73	10	63
2	6/20/2025	10	3	7

## II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 6 of the 9 physical health findings were corrected. Three 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
<b><u>Cardiovascular Chronic Illness Clinic:</u></b> <b>Screen 8:</b> Patients are referred to a specialist for more in-depth treatment as indicated	X				

<b>Finding</b>	<b>Closed</b>	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
<u><b>Endocrine Clinic Chronic Illness Clinic:</b></u> <b>Screen 6:</b> A dilated fundoscopic examination is completed yearly for diabetic inmates		<b>X</b>			
<u><b>Immunity Chronic Illness Clinic:</b></u> <b>Screen 4:</b> Virologic failure is addressed with resistance testing, review of medication adherence and the appropriate change in medication regimens	<b>X</b>				
<b>Screen 10:</b> There is evidence of hepatitis B vaccination for inmates with no evidence of past infection	<b>X</b>				
<u><b>Neurology Chronic Illness Clinic:</b></u> <b>Screen 6:</b> Medications appropriate for the diagnosis are prescribed and rec'd	<b>X</b>				
<u><b>Tuberculosis Chronic Illness Clinic:</b></u> <b>Screen 10:</b> The inmate receives TB medications as prescribed	<b>X</b>				
<u><b>Emergency Services:</b></u> <b>Screen 3:</b> Vital signs including weight are documented	<b>X</b>				
<u><b>Inpatient Infirmary Care:</b></u> <b>Screen 9:</b> A discharge summary is completed by the clinician within 72 hours of discharge		<b>X</b>			

<b>Finding</b>	<b>Closed</b>	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
<b><u>Periodic Screenings:</u></b> <b>Screen 1:</b> The periodic screening encounter is completed within one month of the due date		<b>X</b>			

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that the remaining mental health finding was corrected. All mental health findings are closed.

<b>Finding</b>	<b>Closed</b>	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
<b><u>Outpatient Mental Health Services:</u></b> <b>Screen 16:</b> The ISP is signed by the inmate and all members of the treatment team	<b>X</b>				

### IV. Conclusion

Until appropriate corrective actions are undertaken by MHCF 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.