

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

of

MOORE HAVEN CORRECTIONAL FACILITY

for the

Physical and Mental Health Survey
Conducted November 5-6, 2014

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CAP Assessment Distributed on November 24, 2015

CAP Assessment of Moore Haven Correctional Facility

I. Overview

On November 5-6, 2014 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 November 25, 2014. In December 2014, 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 November 2014 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.

In April 2015, CMA staff reviewed 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 April 21, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 2 of 12 physical health findings and 6 of 18 mental health findings would remain open.

On July 27, 2015 CMA staff again 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 August 25, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff to address the remaining findings. The CAP closure files revealed sufficient evidence to determine that 1 of 2 physical health findings and 3 of 6 mental health findings would remain open.

On November 2, 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 assessment on November 17, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff to address the remaining findings. 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 1 of 1 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<u>CONSULTATIONS</u> PH-10: In 7 of 11 records reviewed, the diagnosis was not reflected on the problem list.	PH-10 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-10.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 4 of 4 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 11 SHOS admissions revealed the following deficiencies:</p> <p>MH-2: In 2 of 4 applicable records, the guidelines for SHOS management were not observed.</p> <p>MH-4: In 3 records, daily rounds were not conducted by the attending clinician.</p>	<p>MH-2 & MH-4 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2 & MH-4.</p>

Finding	CAP Evaluation Outcome
<p><u>USE OF FORCE</u></p> <p>MH-6: In 1 of 2 applicable records (3 reviewed), there was no indication that mental health staff interviewed the inmate the next working day to determine the level of mental health care needed.</p>	<p>MH-6 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-6.</p>

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>MH-13: In 7 of 19 applicable records (22 reviewed), the ISP was not signed by a member or members of the MDST and/or inmate or a refusal was not documented on form DC4-711A.</p>	<p>MH-13 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-13.</p>

IV. Conclusion

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