

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

of

OKEECHOBEE CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted February 19-21, 2019

CMA STAFF

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I. Overview

On February 19-21, 2019, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Okeechobee Correctional Institution (OKECI). The survey report was distributed on March 27, 2019. In April 2019, OKECI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the OKECI 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 Okeechobee Correctional Institution

CAP #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	10/8/19	11/7/19	On-site	44	23	21
2	6/25/20	8/17/20	Off-site	23	6	17

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 11 of the 16 physical health findings were corrected. Five physical 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
<u>Chronic Illness Clinic</u> PH-1: In 4 of 16 records reviewed, the diagnosis was not documented as required.		X			
<u>Endocrine Clinic</u> PH-2: In 11 records, there was no evidence of appropriate exam for diagnosis.	X				

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
<p><u>Endocrine Clinic</u> PH-3: In 3 records, there was no evidence that control of the disease was evaluated at each visit.</p>	X				
<p><u>Endocrine Clinic</u> PH-6: In 4 records, there was no evidence of flu vaccination or refusal.</p>	X				
<p><u>Gastrointestinal Clinic</u> PH-7: In 5 records, there was no evidence of screening for hepatocellular carcinoma when indicated.</p>		X			
<p><u>Gastrointestinal Clinic</u> PH-8: In 9 records, there was no evidence of hepatitis A and/or B vaccination or refusal.</p>		X			
<p><u>Gastrointestinal Clinic</u> PH-9: In 4 records, there was no evidence of flu vaccination or refusal.</p>	X				
<p><u>Neurology Clinic</u> PH-11: In 2 of 10 applicable records, there was no evidence that seizures were classified.</p>		X			

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
<p><u>Respiratory Clinic</u> PH-13: In 5 of 13 records reviewed, there was no evidence of flu vaccination or refusal.</p>	X				
<p><u>Tuberculosis Clinic</u> PH-14: In 2 records, aspartate aminotransferase (AST) and alanine transaminase (ALT) were not completed as indicated.</p>	X				
<p><u>Tuberculosis Clinic</u> PH-15: In 2 of 6 applicable records, the patient did not have monthly AST/ALT when indicated.</p>	X				
<p><u>Tuberculosis Clinic</u> PH-16: In 2 of 2 applicable records, there was no indication that a patient having adverse drug reactions was referred to the provider immediately.</p>			X		
<p><u>Emergency Services</u> PH-17: In 1 of 4 applicable records, there was no indication of immediate response by medical staff for a life-threatening condition.</p>	X				

<p><u>Emergency Services</u> PH-19: In 2 of 9 records, there was no documentation that required follow-up occurred timely and consistent with medical needs.</p>	<p>X</p>				
<p><u>Consultations</u> PH-21: In 3 records, consultations were not conducted timely.</p>	<p>X</p>				
<p><u>Consultations</u> PH-22: In 3 of 11 applicable records, follow-up diagnostics and appointments did not occur as recommended.</p>	<p>X</p>				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 6 of the 7 mental health findings were corrected. One mental health finding 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
<p><u>SHOS</u> MH-1: In 3 records, an emergency evaluation was not completed by mental health or nursing staff prior to a SHOS admission.</p>	X				
<p><u>SHOS</u> MH-5: In 4 records, there was no evidence of daily rounds by the attending clinician.</p>		X			
<p><u>Psychological Emergencies</u> MH-9: In 2 records, there was no indication in the record that the inmate declared an emergency.</p>	X				
<p><u>Psychological Emergencies</u> MH-10: In 2 of 8 applicable records, there was no evidence of a thorough clinical evaluation by the clinician.</p>	X				
<p><u>Psychological Emergencies</u> MH-11: In 2 of 8 applicable records, the disposition was not clinically appropriate.</p>	X				

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
<u>Inmate Requests</u> MH-14: In 2 of 4 applicable records, the interview or referral did not occur as intended in response to an inmate request.	X				
<u>Outpatient Mental Health</u> MH-17: In 3 records, the Individualized Services Plan (ISP) was not signed by all relevant parties.	X				

IV. Conclusion

Physical Health-Main Unit

PH-1, PH-7, PH-8, PH-11, & PH-16 will remain open and all other physical health findings are closed.

Mental Health-Main Unit

MH-5 will remain open and all other mental health findings are closed.

Until appropriate corrective actions are undertaken by OKECI 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.