

**OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

PUTNAM CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted May 9-11, 2017

CMA STAFF

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CAP Assessment Distributed on December 8, 2017

CAP Assessment of Putnam Correctional Institution

I. Overview

On May 9-11, 2017, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Putnam Correctional Institution (PUTCI). The survey report was distributed on June 5, 2017. In July 2017, PUTCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the May 2017 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. On November 9, 2017, 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 CAP assessment on November 22, 2017 to evaluate the effectiveness of corrective actions taken by institutional staff. 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 2 of the 2 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
<u>ENDOCRINE CLINIC</u> PH-1: In 1 of 4 applicable records (7 reviewed), there was no evidence of the required annual fundoscopic examination.	PH-1 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-1.

Finding	CAP Evaluation Outcome
<u>MISCELLANEOUS CLINIC</u> PH-2: In 1 of 4 records reviewed, there was no evidence that abnormal labs were reviewed timely.	PH-2 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close PH-2.

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 2 of 2 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT MENTAL HEALTH SERVICES</u></p> <p>A comprehensive review of 8 outpatient records revealed the following deficiencies:</p> <p>MH-1: In 3 of 7 applicable records, the Individualized Service Plan (ISP) was not reviewed and revised at the 180-day interval.</p> <p>MH-2: In 3 records, problems were not listed on the problem list.</p>	<p>MH-1 & MH-2 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1 & MH-2.</p>

IV. Conclusion

All findings as a result of the May 2017 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.