

**CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**SANTA ROSA CORRECTIONAL INSTITUTION - MAIN**

for the

Physical and Mental Health Survey  
Conducted March 7-9, 2023

**CMA STAFF**

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**I. Overview**

On March 7-9, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Santa Rosa Correctional Institution (SARCI). The survey report was distributed on April 17, 2023. In May 2023, Santa Rosa CI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the SARCI 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 Santa Rosa Correctional Institution – Main Unit**

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	11/10/23	12	1	11

**II. Physical Health Assessment Summary**

The CAP closure files revealed sufficient evidence to determine that 7 of the 8 physical health findings were corrected. One physical health finding remains 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>Inpatient Infirmary Care</u></b> Screen 8: A discharge note containing all of the required information is completed as required	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>
<p><b><u>Medication And Vaccination Administration</u></b></p> <p>Screen 4: If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance</p>	<b>X</b>				
<p>Screen 5: There is evidence of pneumococcal vaccination or refusal</p>	<b>X</b>				
<p><b><u>Periodic Screenings</u></b></p> <p>Screen 2: All components of the screening are completed and documented as required</p>		<b>X</b>			
<p><b><u>PREA Medical Review</u></b></p> <p>Screen 3: There is documentation that the alleged victim was provided education on STIs</p>	<b>X</b>				
<p>Screen 4: Prophylactic treatment and follow-up care for STIs are given as indicated</p>	<b>X</b>				
<p>Screen 6: Repeat STI testing is completed as required</p>	<b>X</b>				
<p>Screen 8: The inmate is evaluated by mental health by the next working day</p>	<b>X</b>				

### III. Mental Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 4 of the 4 mental health findings were corrected. All mental 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
<p><b><u>Mental Health Inmate Request</u></b>            Screen 3: The response to the request is direct, addresses the stated need, and is clinically appropriate</p>	X				
<p>Screen 4: The follow-up to the request occurs as intended</p>	X				
<p><b><u>Outpatient Psychotropic Medication Practices</u></b>            Screen 9: The nurse meets with the inmate if he/she refused psychotropic medication for two consecutive days and referred to the clinician if needed.</p>	X				
<p>Screen 10: The inmate signs DC4-711A "Refusal of Health Care Services" after three consecutive OR five medication refusals in one month.</p>	X				

#### **IV. Conclusion**

Until appropriate corrective actions are undertaken by SARCI 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.