

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

of

SUMTER CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted January 9-11, 2018

CMA STAFF

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CAP Assessment Distributed on October 9, 2019

CAP Assessment of Sumter Correctional Institution

I. Overview

On January 9-11, 2018, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Sumter Correctional Institution (SUMCI). The survey report was distributed on February 9, 2018. In March 2018, SUMCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the January 2018 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days.

On July 24, 2018, 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 August 27, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 14 of 29 physical health findings and 7 of 30 mental health findings were corrected.

On November 9, 2018, 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 December 4, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 7 of 15 physical health findings and 8 of 23 mental health findings were corrected.

On April 15, 2019, 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 May 13, 2019 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 6 of 8 physical health findings and 12 of 15 mental health findings were corrected.

On August 26, 2019, 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 off-site CAP assessment on September 26, 2019 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 0 of the 2 physical health findings were corrected. Two physical health findings will remain open.

Finding	CAP Evaluation Outcome
<p><u>CHRONIC ILLNESS CLINIC REVIEW</u></p> <p>PH-2: In 7 of 16 records reviewed, there was no evidence that inmates were seen at the required intervals.</p>	<p>PH-2 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been met. PH-2 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><u>SICK CALL</u></p> <p>PH-17: In 4 of 9 applicable records (18 reviewed), there was no evidence that the follow-up visit was completed timely.</p>	<p>PH-17 OPEN</p> <p>Adequate evidence of in-service training was provided, however institutional monitoring indicated an acceptable level of compliance had not been met. PH-17 will remain open.</p>

III. Mental Health Assessment Summary

The CAP closure files revealed evidence to determine that 3 of 3 mental health findings were corrected. All mental health findings are closed.

Finding	CAP Evaluation Outcome
<p><u>OUTPATIENT SERVICES</u></p> <p>A comprehensive review of 9 outpatient mental health records revealed the following deficiencies:</p> <p>MH-21: In 3 records, the inmate was not seen by mental health within 14 days of arrival.</p> <p>MH-24: In 5 records, the ISP was not signed by all relevant parties.</p> <p>MH-27: In 3 records, the frequency of clinical contacts was not sufficient.</p>	<p>MH-21, MH-24, & MH-27 CLOSED</p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-21, MH-24, & MH-27.</p>

IV. Conclusion

PH-2 & PH-17 will remain open and all other physical health portions are closed.

All mental health portions are closed.

Until appropriate corrective actions are undertaken by 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 visit.