

**OFF-SITE CORRECTIVE ACTION PLAN
ASSESSMENT**

of

SUMTER CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted September 14-16, 2021

CMA STAFF

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I. Overview

On September 14-16, 2021, 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 October 8, 2021. In November 2021, 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 SUMCI 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 Sumter Correctional Institution

CAP #	Request Date for Monitoring Documents	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	3/29/22	4/7/22	Off-site	20	5	15

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 11 of the 15 physical health findings were corrected. Four 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
<p><u>ENDOCRINE CLINIC</u></p> <p>PH-1: In 4 of 13 applicable records (17 reviewed), there was no evidence inmates with HgbA1c over 8% were seen every three months as required.</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>MISCELLANEOUS CLINIC</u></p> <p>PH-2: In 2 records, there was no evidence of a complete and appropriate examination.</p>	X				
<p>PH-3: In 2 records, there was no evidence of control of the disease and/or status of the patient.</p>	X				
<p><u>ONCOLOGY CLINIC</u></p> <p>Ph-4: In 2 of 4 applicable records (5 reviewed), there was no evidence of pneumococcal vaccination or refusal.</p>					X
<p><u>RESPIRATORY CLINIC</u></p> <p>PH-5: In 3 of 15 records reviewed, there was no evidence of pneumococcal vaccination or refusal.</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>EMERGENCY SERVICES</u></p> <p>PH-6: In 1 of 5 applicable records (16 reviewed), there was no evidence that clinician follow-up was completed in a timely manner.</p>	X				
<p><u>SICK CALL</u></p> <p>PH-7: In 2 of 2 applicable records (15 reviewed), there was no evidence that clinician follow-up was completed in a timely manner.</p>		X			
<p><u>INFIRMARY CARE</u></p> <p>PH-8: In 4 of 9 applicable records (12 reviewed), there was no evidence of a complete discharge note by the nurse.</p>	X				
<p><u>CONSULTATIONS</u></p> <p>PH-9: In 3 records, the consultation was not performed in a timely manner.</p>	X				

PH-10: In 8 records, the diagnosis was not recorded on the problem list.	X				
<u>INTRA-SYSTEM TRANSFERS</u> PH-11: In 3 of 15 records reviewed, there was no evidence the clinician reviewed the record within 7 days of arrival.	X				
<u>MEDICATION ADMINISTRATION</u> PH-12: In 4 of 12 records reviewed, there was no evidence all medication orders were signed, dated, and/or timed by nursing staff.	X				
<u>PILL LINE ADMINISTRATION</u> PH-13: Medical personnel did not wash their hands prior to beginning the pill line.	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
PH-14: There was no evidence that an oral cavity check for was conducted to ensure medications were swallowed.	X				
<p style="text-align: center;"><u>INSTITUTIONAL TOUR</u></p> PH-15: Procedures to access medical and dental sick call were not posted in all dorms.	X				

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 4 of the 5 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>SELF-INJURY AND SUICIDE PREVENTION (SHOS)</u></p> <p>MH-1: In 1 record, the patient was not observed at the frequency ordered by the clinician.</p>		X			
<p>MH-2: In 1 of 2 applicable records, mental health staff did not provide adequate post-discharge follow-up.</p>	X				
<p><u>INMATE REQUESTS</u></p> <p>MH-3: In 3 of 10 records reviewed, an interview or referral did not occur as intended in response to an inmate request.</p>	X				
<p><u>SPECIAL HOUSING</u></p> <p>MH-4: In 2 of 9 records reviewed, the pre-confinement physical evaluation was not completed prior to admission.</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>OUTPATIENT MH SERVICES</u></p> <p>MH-5: In 3 of 10 applicable records (12 reviewed), the inmate was not interviewed by mental health within 14 days of arrival to the institution.</p>	X				

IV. Conclusion

Physical Health-Main Unit

The following physical health findings will close: PH-2, PH-3, PH-6, PH-8, PH-9, PH-10, PH-11, PH-12, PH-13, PH-14, & PH-15. All other physical health findings will remain open.

Mental Health-Main Unit

The following mental health findings will close: MH-2, MH-3, MH-4 & MH-5. All other mental health findings will remain open.

Until appropriate corrective actions are undertaken by SUMCI 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.