## FOURTH CORRECTIVE ACTION PLAN ASSESSMENT of

# SUWANNEE CORRECTIONAL INSTITUTION - ANNEX

for the

Physical and Mental Health Survey Conducted January 10-12, 2023

CMA STAFF

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## I. Overview

On January 10-2, 2023, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Suwannee Correctional Institution - Annex (SUWAN). The survey report was distributed on February 27, 2023. In March 2023, SUWAN submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the SUWAN 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.

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	11/1/23	44	17	27
2	2/26/24	17	14	3
3	6/18/24	14	6	8
4	12/28/2024	6	4	2

#### Summary of CAP Assessments for Suwannee Annex

## II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 2 of the 4 physical health findings were corrected. Two physical health findings remain open.

Finding	Closed	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
Endocrine Clinic Chronic Illness					
<u>Clinic:</u>		Х			
Screen 6: A dilated fundoscopic					
examination is completed yearly					
for diabetic inmates					

Finding	Closed	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
General Chronic Illness Clinic: Screen 3: The inmate is seen at intervals required for their M-grade	x				
or at intervals specified by the clinician					
Inpatient Infirmary Care: Screen 2: All orders are received and implemented		x			
Intra-System Transfers: Screen 7: A clinician reviews the health record and DC4-760A within seven (7) days of arrival	X				

# III. Mental Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 0 of the 2 mental health findings were corrected. Two mental health findings will remain open.

Finding	Closed	<b>Open:</b> Evaluation of records indicated an acceptable level of compliance was not met	<b>Open:</b> No episodes were available for review	<b>Open:</b> Institutional monitoring was inadequate	<b>Open:</b> Institutional monitoring indicated compliance was not met
Outpatient Mental Health Services: Screen 16: The ISP is signed by the inmate and all members of the treatment team					x
Screen 17: The ISP is reviewed and revised at least every 180 days					х

# **IV. Conclusion**

Until appropriate corrective actions are undertaken by SUWAN 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.