

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

of

TOMOKA CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted September 13 -15, 2022

CMA STAFF

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I. Overview

On September 13-15, 2022, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Tomoka Correctional Institution (TOMCI). The survey report was distributed on October 25, 2022. On December 21, 2022, TOMCI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the TOMCI 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 Tomoka Correctional Institution

CAP #	CAP Assessment Date	Assessment Location	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	June 13, 2023	Off-site	40	19	21
2	October 9, 2023	Off-site	19	10	9

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 6 of the 13 physical health findings were corrected. Seven physical health findings 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
Endocrine Clinic Screen 6: A dilated fundoscopic examination is completed yearly for diabetic inmates.	X				
Emergency Services Screen 3: Vital signs including weight are documented.	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
Screen 9: Inmates returning from an outside hospital are evaluated by the clinician within one business day.	X				
<u>Outpatient Infirmiry Care</u> Screen 2: All orders are received and implemented.	X				
<u>Inpatient Infirmiry Care</u> Screen 2: All orders are received and implemented.		X			
Screen 6: Clinician rounds are completed and documented as required.	X				
Screen 7: Weekend and holiday clinician phone rounds are completed and documented as required.	X				
<u>Medication And Vaccination Administration</u> Screen 4: There is evidence of pneumococcal vaccination or refusal.		X			
Screen 5: There is evidence of influenza vaccination or refusal.		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>Intra-System Transfers</u> Screen 7: A clinician reviewed the health record and DC4-760A within seven (7) days of arrival.</p>		X			
<p><u>Periodic Screenings</u> Screen 3: All diagnostic tests are completed prior to the periodic screening encounter.</p>				X	
<p><u>PREA Medical Review</u> Screen 8: The inmate is evaluated by mental health by the next working day.</p>		X			
<p><u>Dental Care</u> Screen 12: Consultations or specialty services are completely timely.</p>		X			

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 3 of the 6 mental health findings were corrected. Three mental 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
<u>Use of Force</u> Screen 1: A post use-of-force physical examination is present in the record.	X				
Screen 2: The post use-of-force physical examination is completed in its entirety.	X				
Screen 3: There is evidence physical health staff completed a referral to mental health staff.		X			
Screen 5: Recent changes in the inmate's condition are addressed.	X				
<u>Outpatient Psychotropic Medications</u> Screen 9: The nurse met with the inmate if he/she refused psychotropic medication for two consecutive days and referred to the clinician if needed.		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
Screen 10: The inmate signed DC4-711A "Refusal of Health Care Services" after three consecutive OR five medication refusals in one month.		X			

IV. Conclusion

Until appropriate corrective actions are undertaken by TOMCI 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.