

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

of

TOMOKA CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey
Conducted September 10 - 11, 2014

CMA STAFF

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CAP Assessment Distributed on October 7, 2016

CAP Assessment of Tomoka Correctional Institution

I. Overview

On September 9 - 10, 2014 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 September 26, 2014. In October 2014, 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 September 2014 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.

In April 2015, CMA staff reviewed 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 April 16, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 16 of 30 physical health findings and 13 of 20 mental health findings were corrected.

In September 2015, CMA staff reviewed 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 September 28, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 11 of 14 physical health findings and 3 of 7 mental health findings were corrected. One cap finding, CF-1, was added for in-service training, monitoring, and corrective action.

In January 2016, CMA staff reviewed monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site assessment on February 11, 2016 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 3 of 4 physical health findings and 2 of 4 mental health findings were corrected.

In May 2016, CMA staff reviewed monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site assessment on June 9, 2016 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 1 of 1 physical health findings and 1 of 2 mental health findings were corrected.

In September 2016, CMA staff reviewed monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site assessment on October 6, 2016 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

All physical health findings are closed.

III. Mental Health Assessment Summary

CAP closure files revealed evidence to determine that 0 of 1 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
<p><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></p> <p>MH-3: In 8 of 13 records reviewed, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p>	<p>MH-3 OPEN</p> <p>Adequate evidence of in-service training was provided, however a review of the records provided indicated an acceptable level of compliance had not been reached. MH-3 will remain open.</p>

IV. Conclusion

All physical health findings are closed. MH-3 will remain open and all other mental health findings are closed.

Until such time as 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 visit but the option remains open to conduct an on-site assessment.