

**FIRST CORRECTIVE ACTION PLAN
ASSESSMENT**
of

WAKULLA CORRECTIONAL INSTITUTION ANNEX

for the

Physical and Mental Health Survey
Conducted September 17-19, 2024

CMA STAFF

Lynne Babchuck, LCSW

CMA CLINICAL SURVEYORS

Sue Porterfield, APRN

Aimee Castro, RN

Dynitia Brimm, LCSW

Distributed April 30, 2025

I. Overview

On September 17-19, 2024, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Wakulla Correctional Institution – Annex (WAKAN). The survey report was distributed on November 4, 2024. In December 2024, WAKAN submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the WAKAN 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 Wakulla Correctional Institution - Annex

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	4/30/2025	22	6	16

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 8 of the 13 physical health findings were corrected. Five 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
Immunity Chronic Illness Clinic: Screen 2: There is evidence of an appropriate physical examination.	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
<u>Miscellaneous Chronic Illness Clinic:</u> Screen 6: Patients are referred to a specialist for more in-depth treatment as indicated	X				
<u>Oncology Chronic Illness Clinic:</u> Screen 9: Patients are referred to a specialist for more in-depth treatment as indicated		X			
<u>Emergency Services:</u> Screen 3: Vital signs including weight are documented Screen 4: There is evidence of appropriate and applicable patient education		X			
Screen 7: Clinician's orders from the follow-up visit are completed as required	X				
<u>Consultations:</u> Screen 3: The consultation is completed in a timely manner as dictated by the clinical needs of the inmate		X			
<u>Medication And Vaccination Administration:</u> Screen 1: The inmate receives medications as prescribed	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 3: If the inmate missed medication doses (3 consecutive or 5 doses within one month), there is evidence of counseling for medication non-compliance	X				
Periodic Screenings: Screen 1: The periodic screening encounter is completed within one month of the due date	X				
Screen 3: All diagnostic tests are completed prior to the periodic screening encounter		X			
Screen 5: All applicable health education is provided	X				
PREA Medical Review: Screen 8: The inmate is evaluated by mental health by the next working day		X			

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 8 of the 9 mental health findings were corrected. One 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>Self-Injury and Suicide Prevention Review:</u> Screen 4: The inmate is observed at the frequency ordered by the clinician		X			
<u>Psychiatric Restraints:</u> Screen 4: Patient's behavior is observed every 15 minutes and documented	X				
Screen 5: Patient is offered food at regular meal times and fluids and bedpan/urinal use every two hours	X				
Screen 6: Respiration and circulation checks are completed and documented	X				
Screen 13: The inmate is referred to the multi-disciplinary services team (MDST)	X				
<u>Inpatient Mental Health Services:</u> Screen 22: Inpatient mental health daily nursing evaluation is completed as required.	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
<u>Outpatient Mental Health Services:</u> Screen 14: ISP goals are time limited and written in objective, measurable behavioral terms	X				
<u>Outpatient Psychotropic Medication Services:</u> Screen 8: The inmate receives medication(s) as prescribed	X				
<u>Aftercare Planning:</u> Screen 2: The appropriate consent form is signed by the inmate within 30 days after initiation of the continuity of care plan	X				

IV. Conclusion

Until appropriate corrective actions are undertaken by WAKAN 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.