

**FIRST CORRECTIVE ACTION PLAN
ASSESSMENT**

of

WAKULLA CORRECTIONAL INSTITUTION

for the

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

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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 (WAKCI). The survey report was distributed on November 4, 2024. In December 2024, WAKCI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the WAKCI 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

CAP #	CAP Assessment Date	Total # Survey Findings	Total # Open Findings	Total # Findings Closed
1	4/30/2025	14	4	10

II. Physical Health Assessment Summary

The CAP closure files revealed sufficient evidence to determine that 4 of the 7 physical health findings were corrected. Three 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
<u>Immunity Chronic Illness Clinic:</u> 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
<p><u>Miscellaneous Chronic Illness Clinic:</u> Screen 6: Patients are referred to a specialist for more in-depth treatment as indicated</p>		X			
<p><u>Inpatient Infirmary Care:</u> Screen 2: All orders are received and implemented</p>	X				
<p><u>Consultations:</u> Screen 3: The consultation is completed in a timely manner as dictated by the clinical needs of the inmate</p>		X			
<p><u>Periodic Screenings:</u> Screen 1: The periodic screening encounter is completed within one month of the due date</p>	X				
<p>Screen 3: All diagnostic tests are completed prior to the periodic screening encounter</p>	X				
<p>Screen 4: Referral to a clinician occurs if indicated</p>		X			

III. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 6 of the 7 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>Psychological Emergency:</u> Screen 3: Documentation indicates that the clinician considered the inmate's history of mental health treatment and past suicide attempts</p>		X			
<p>Screen 4: Documentation indicates the clinician fully assessed suicide risk</p>	X				
<p>Screen 6: Appropriate interventions are made</p>	X				
<p>Screen 7: The disposition is clinically appropriate</p>	X				
<p>Screen 8: There is appropriate follow-up as indicated in response to the emergency</p>	X				
<p><u>Outpatient Mental Health Services:</u> Screen 7: A refusal form is completed if the inmate refuses recommended sex offender treatment</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
Screen 11: If mental health services are initiated at this institution, the initial ISP is completed within 30 days	X				

IV. Conclusion

Until appropriate corrective actions are undertaken by WAKCI 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.