# THIRD ON-SITE CORRECTIVE ACTION PLAN ASSESSMENT

of

## WAKULLA CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey Conducted December 10 – 11, 2014

## **CMA STAFF**

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#### CAP Assessment of Wakulla Correctional Institution

#### I. Overview

On December 10 - 11, 2014, the Correctional Medical Authority (CMA) conducted an onsite physical and mental health survey of Wakulla Correctional Institution (WAKCI). The survey report was distributed on January 6, 2015. In February of 2015, 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 December 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 May 2015, CMA staff requested access to 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 May 28 - 29, 2015 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 19 of 27 physical health findings and 11 of 16 mental health findings were corrected on the Main Unit. Additionally, 27 of 30 physical health findings and 9 of 11 mental health findings were corrected on the Annex.

In September 2015, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, an on-site assessment was conducted on September 25, 2015. The CAP closure files revealed sufficient evidence to determine that 5 of 8 physical health findings and 3 of 5 mental health findings were corrected on the Main Unit. Additionally, 2 of 3 physical health findings and 2 of 2 mental health findings were corrected on the Annex.

In January 2016, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, an on-site CAP assessment was conducted on January 29, 2016. 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

## A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 3 of the 3 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
GASTROINTESTINAL CLINIC	PH-8 & PH-9 CLOSED
A comprehensive review of 13 inmate records revealed the following deficiencies:	Adequate evidence of in-service training and documentation of correction were provided to close PH-8 & PH-9.
PH-8: In 3 of 9 applicable records, there was no evidence that hepatitis A & B vaccine were given to inmates with hepatitis C infection and no prior history of A & B infection.	
PH-9: In 2 of 8 applicable records, there was no evidence of pneumococcal vaccine or refusal.	

Finding	CAP Evaluation Outcome
IMMUNITY CLINIC	PH-10 CLOSED
PH-10: In 8 of 10 records reviewed, there was no evidence of hepatitis B vaccine or refusal.	Adequate evidence of in-service training and documentation of correction were provided to close PH-10.

# B. Annex

The CAP closure files revealed sufficient evidence to determine that 1 of 1 physical health findings were corrected. All physical health findings are closed.

Finding	CAP Evaluation Outcome
GASTROINTESTINAL CLINIC	PH-7 CLOSED
PH-7: In 9 of 14 records reviewed, there was no evidence that hepatitis A & B vaccinations were given to inmates with hepatitis C and no prior history of A & B infection.	Adequate evidence of in-service training and documentation of correction were provided to close PH-7.

## **III. Mental Health Assessment Summary**

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 1 of 2 mental health findings were corrected. One mental health finding will remain open.

Finding	CAP Evaluation Outcome
SELF-HARM OBSERVATION STATUS (SHOS) A comprehensive review of 10 SHOS admissions revealed the following deficiencies:	MH-4 CLOSED Adequate evidence of in-service training and documentation of correction were provided to close MH-4.
<ul> <li>MH-4: In 2 records, the DC4-732</li> <li>"Infirmary/Hospital Admission Nursing Evaluation" was not completed within 2 hours of an SHOS admission</li> <li>MH-7: In 4 records, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</li> </ul>	MH-7 OPEN Adequate evidence of in-service training was provided, however a review of randomly selected records indicated an acceptable level of compliance had not been met. MH-7 will remain open.

## A. Annex

All mental health findings were closed on the second CAP assessment.

## **IV. Conclusion**

#### Physical Health-Main Unit

All physical health findings are closed.

#### **Physical Health-Annex**

All physical health findings are closed.

#### Mental Health-Main Unit

MH-7 will remain open and all other mental health findings are closed.

#### **Mental Health-Annex**

All mental health findings are closed.

Until such time as 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.