



# **CORRECTIONAL MEDICAL AUTHORITY**

## **PHYSICAL & MENTAL HEALTH SURVEY**

of

## **DESOTO CORRECTIONAL INSTITUTION**

in

**Arcadia, Florida**

on

**April 1 - 3, 2009**

**CMA Physical Health Team Leader:**

Kaye Harris, RN

**CMA Mental Health Team Leader:**

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**Physical Health Team Members:**

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**Mental Health Team Members:**

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**Distributed on April 16, 2009**

## DEMOGRAPHICS

The institution provided the following information in the Pre-survey Questionnaire.

INSTITUTIONAL INFORMATION			
Population	Type	Custody Level	Medical Level
1,927	Male	Close	3

### Institutional Potential/Actual Workload

Main Unit Capacity	1,338	Current Main Unit Census	1,545
Work Camp Capacity	288	Current Annex Census	382
Satellite Unit(s) Capacity	96	Current Satellite(s) Census	96
<b>Total Capacity</b>	<b>1,722</b>	<b>Total Current Census</b>	<b>1,927</b>

### Inmates Assigned to Medical/Mental Health Grades

Medical Grade	1	2	3	4	Impaired	
		1,348	457	121	1	1
Mental Health Grade (S-Grade)	<u>Mental Health Outpatient</u>			<u>MH Inpatient</u>		
	1	2	3	4	5	Impaired
	1,881	44	NA	NA	NA	NA

### Inmates Assigned to Special Housing Status

Confinement/ Close Management	DC	AC	PM	CM3	CM2	CM1
		155	78	0	NA	NA

# OVERVIEW

## **Institutional Description**

Desoto Correctional Institution (DESCI) houses male inmates of minimum, medium, and close custody levels and is designated as a medical grade 3, psychological grade 2 facility. Health care services are provided to the Annex (Main Unit), the Work Camp and to the Arcadia Road Prison.

The overall scope of health services provided at DESCI includes comprehensive medical, dental, mental health, and pharmaceutical services. Specific services include: health education, preventive care, chronic illness clinics, emergency care, mental health outpatient, and an observation/infirmery as required.

The Correctional Medical Authority (CMA) conducted a thorough review of the medical, mental health and dental systems at DESCI April 1 - 3, 2009. Record reviews evaluating the provision and documentation of care were also conducted. Additionally, a review of administrative processes and a tour of the physical plant were conducted.

## **Department Findings**

In addition to the institutional findings contained in this report, other areas of concern may be noted during the survey. These findings may be based on standards endorsed by the CMA, but not addressed in OHS policy, procedure or directive. They may be based on issues beyond institutional control, requiring intervention at a higher level. The OHS should submit a separate corrective action plan for these findings. These findings are clearly identified as "Department Findings" and appear following the body of the Mental Health section of this report. Department findings from all institutional surveys, including those from the DESCI survey, will be routinely reviewed by the CMA Quality Management Committee and reported in the CMA Annual Report.

## **Exit Conference and Final Report**

At the conclusion of the survey, the survey team conducted an exit conference with institutional personnel to discuss preliminary survey results. The findings and final conclusions presented in this report are a result of further analysis of the information collected during the survey. The suggested corrective action(s) included in this report should not be construed as the only action required to demonstrate correction, but should be viewed as a guide for developing a corrective action plan. Where recommended corrective actions suggest in-service training, a copy of the curriculum and attendance roster should be included in the corrective action plan files. Additionally, evidence of appropriate monthly monitoring should be included in the files for each finding. Unless otherwise specified, this monitoring should be conducted by an institutional clinician/peer and must be documented by a monthly compilation of the following:

- 1) The inmate names and DC numbers corresponding to the medical records reviewed;
- 2) The criteria/finding being reviewed;
- 3) An indication of whether the criteria/finding was met for each record reviewed;

- 4) The percentage of records reviewed each month complying with the criteria;
- 5) Back-up documentation consisting of copies of the relevant sections reviewed from the sampled records.

## PHYSICAL HEALTH FINDINGS

### ADMINISTRATIVE SYSTEM REVIEWS

No significant findings were noted regarding the administrative aspects of the institution's health delivery system.

### CLINICAL RECORD REVIEWS

#### OFFENDER BASED INFORMATION SYSTEM (OBIS)

Finding(s)	Suggested Corrective Action(s)
<p><b>Reviews consisting of comparisons among six individual medical records and corresponding OBIS information revealed that:</b></p> <p><b>PH-1: None of the six records reviewed contained a complete and/or accurate problem list.</b></p>	<p>Include documentation in the closure file that appropriate in-service training has been provided to staff regarding the issue listed in the Finding(s) column.</p> <p>Create a monitoring instrument on which the issue is regularly examined by reviewing no less than 10 records weekly to evaluate the effectiveness of corrections. Monitoring intervals may be modified to less often if results indicate appropriate compliance or correction.</p> <p>Continue monitoring until closure is affirmed through a CMA corrective action plan assessment.</p>

### **CONCLUSION**

Overall, the medical care at Desoto Correctional Institution meets established standards. A suggestion was offered to the Health Services Administrator to improve the sick call process. It was recommended that a new system for inmate prescription refills be developed. Currently, inmates must sign up and attend sick call to request refills for prescribed medications. Also noted was that some record entries, both from the physician and nursing staff, were illegible and difficult to read. This was discussed with the medical/administrative staff during the survey. Staff should be commended on the level of care provided to inmates under their charge.

# MENTAL HEALTH FINDINGS

## OVERVIEW

Desoto Correctional Institution provides outpatient mental health services only. The following are the mental health grades used by the department to classify inmate mental health needs that are provided at Desoto CI:

- S1 - Inmate requires routine care (sick call or emergency).
- S2 - Inmate requires ongoing services of outpatient psychology (intermittent or continuous).

## CLINICAL REVIEWS

<b>Self-Harm Observation Status</b>	
<b>Finding(s)</b>	<b>Suggested Corrective Action(s)</b>
<b>MH-1: In two of four records reviewed, inmates were not observed every 15 minutes as ordered by the physician.</b>	<p>Include documentation in the closure file that appropriate in-service training has been provided to staff regarding the issues in the Finding(s) column.</p> <p>Monitor a minimum of ten records monthly for compliance. Monitoring intervals may be modified to less often if the results indicate appropriate compliance or correction.</p> <p>Continue monitoring until closure is affirmed through the CMA corrective action plan assessment.</p>

## CONCLUSION

The Desoto Correctional Institution mental health department consists of one full time and one part-time behavioral health specialist and a Sr. Psychologist who provides supervision two days per week. The inmates interviewed reported feeling mental health staff are helpful and listen to their concerns. The assessments are thorough and individualized. Mental health staff works with security when appropriate to ensure inmates adjust to the prison environment. Although the lack of findings in this report reflects the dedication of the staff to provide quality mental health services, we are concerned that any staff reductions could impact the quality of services provided.

## **DEPARTMENT FINDINGS**

In addition to the physical and mental health findings referenced previously in this report, other issue(s) were identified during the survey that may be beyond the scope of the institution to address in an institutional corrective action plan (CAP). The issues may be based on standards endorsed by the CMA, but not addressed in department policy, procedure, or directive and therefore beyond institutional control. Issues identified below are currently under discussion with the OHS staff and will be addressed through the CMA's Quality Management Committee. Until such time as a resolution is reached between the CMA and the OHS, these issues will continue to be reflected as "Department Findings" in individual institutional reports when applicable.

### **PHYSICAL HEALTH**

Finding(s)
<b>Dept-1: Inmates in special housing are not offered one hour of exercise per day, outside the cell, five days per week.</b>

### **MENTAL HEALTH**

Finding(s)
<b>No mental health findings.</b>

## **SURVEY PROCESS**

The goals of CMA surveys are to:

- Determine if the physical, dental and mental health care provided to inmates in all state and privately operated correctional institutions is consistent with state and federal law and is consistent with standards of care generally accepted in the professional health care community at large;
- Promote ongoing improvement in the correctional system of health services; and,
- Assist the Department of Corrections in identifying mechanisms to provide cost effective health care to inmates.

To achieve these goals, specific criteria designed to evaluate inmate care and treatment in terms of effectiveness and fulfillment of statutory responsibility are measured. They include determining if inmates:

- Have adequate access to medical and dental health screening and evaluation and to ongoing preventative and primary health care.
- Receive adequate and appropriate mental health screening, evaluation and classification.
- Receive complete and timely orientation on how to access physical, dental and mental health services.
- Have adequate access to medical and dental treatment that results in the remission of symptoms or in improved functioning.
- Receive adequate mental health treatment that results in or is consistent with the remission of symptoms, improved functioning relative to their current environment and reintegration into the general prison population as appropriate.
- Receive and benefit from safe and effective medication, laboratory, radiology, and dental practices and have access to timely and appropriate referral and consultation services.
- Are recipients of safe and effective psychotropic medication practices.
- Remain free from the inappropriate use of restrictive control procedures.
- Receive assessments and treatments sufficiently documented to provide a clear picture of the care provided.
- Are provided adequate care and treatment by a sufficient number of qualified staff.

To meet these objectives, the CMA contracts with a variety of licensed community and public health care practitioners, such as physicians, psychiatrists, dentists, nurses, psychologists and social workers. The survey process includes a review of the physical, dental and mental health systems; specifically, the existence and application of written policies and procedures, staff credentials, staff training, confinement practices, and a myriad of additional administrative issues. Individual case reviews are also conducted. The cases selected for review are representative of inmates who are receiving mental and/or physical health services (or who are eligible to receive such services).

Conclusions drawn by members of the survey team are based on several methods of evidence collection:

- Physical evidence – direct observation by members of the survey team (tours and observation of evaluation/treatment encounters)

- Testimonial evidence – obtained through staff and inmate interviews (and substantiated through investigation)
- Documentary evidence – obtained through reviews of medical/dental records, treatment plans, schedules, logs, administrative reports, physician orders, service medication administration reports, meeting minutes, training records, etc)
- Analytical evidence – developed by comparative and deductive analysis from several pieces of evidence gathered by the surveyor

Administrative (system) reviews generally measure whether the institution has policies in place to guide and direct responsible institutional personnel in the performance of their duties and if those policies are being followed. Clinical reviews of selected inmate medical, dental and mental health records measure if the care provided to inmates meets the statutorily mandated standard. Encounters of an episodic nature, such as sick call, an emergency, an infirmary admission, restraints or a suicide episode, as well as encounters related to a long-term chronic illness or on-going mental health treatment are also reviewed. Efforts are also made to confirm that administrative documentation, i.e., logs, consultation requests, medication administration reports, etc. coincides with clinical documentation.

Findings identified as a result of the survey may arise from a single event or from a trend of similar events. They may also involve past or present events that either had or may have the potential of compromising inmate health care. All findings identified in the body of the report under the physical or mental health sections require corrective action by institutional staff. Findings identified in the department section require corrective action by central office, security or program area staff.