

CORRECTIONAL MEDICAL AUTHORITY (CMA)
PHYSICAL & MENTAL HEALTH SURVEY
OF
TOMOKA CORRECTIONAL INSTITUTION

in
Daytona Beach, Florida

December 8 - 10, 1999

INSTITUTIONAL STATISTICS PROVIDED CMA ON July 15, 1999				
Population	Custody	Type	Maximum Capacity	Current Occupied Beds
Adult	Close	Male	1159	1091

MEDICAL GRADES				
I	II	III	IV	Impaired
445	419	179	48	51

"S" GRADES				
I	II	III	IV	Impaired
441	46	431	0	6

Physical Health Executive Summary

All conclusions were based on a sample review of medical records; interviews with offenders, health care providers and security staff; and a physical inspection of the institution.

Tomoka Correctional Institution (TOMCI) was constructed in 1981. The institution provides minimum, medium and close custody levels for a maximum capacity of 1159 adult

male offenders. Additionally, there were three satellite units; Reality House with a maximum capacity for 85 offenders, Daytona Beach Community Correctional Center with a maximum capacity for 75 offenders, and Tomoka Work Camp with a maximum capacity for 292 offenders. According to the pre-survey questionnaire (PSQ) prepared by the institution on November 22, 1999, the health care unit at this institution was serving a total of 1091 offenders.

The Correctional Medical Authority (CMA) previously surveyed the physical health system of this institution on June 19 – 21, 1996. There were no Level I or Level II citations identified in the 1996 survey report.

This report contains two Level I citations, three Level II citations and four additional issues.

Physical Health Strengths

1. Documentation prepared by the institution for the survey team to review was presented in an organized and detailed fashion.
2. All sick call, emergency, asthma, diabetes, hypertension and TB/INH Prophylaxis records reviewed indicated that assessment, treatment, and follow-up care was appropriate.

Physical Health Citations - Level I

(For an explanation of the Categories of Citations, see page **Error! Bookmark not defined.**)

Clinical Management/Documentation

1. Clinical Management and or documentation concerns were noted in all six (100%) infirmary records reviewed.

2. All 11 (100%) mortality records reviewed lacked required documentation. Four (36%) of 11 records reviewed indicated inadequate assessments for presenting signs and symptoms, and/or inappropriate treatment/follow-up care.

Physical Health Citations - Level II

Clinical Management/Documentation

3. Two (29%) of seven immunity records reviewed lacked required tests.
4. Two (67%) of three seizure records reviewed indicated inappropriate treatment and follow-up care.
5. Six (40%) of 15 dental records reviewed either indicated delays in treatment, inappropriate treatment/follow-up care, or lacked required documentation.

Physical Health Additional Issues Noted

6. One sink located in the bathroom area of J Dorm was not operational. Additionally, information on how to access health care was not posted in this dorm.
7. Automatic external defibrillators (AEDs) were not used due to the lack of trained personnel.
8. The physician order date was not entered on the x-ray log.
9. Physician entries in sick call and infirmary records reviewed were barely legible.

Mental Health Executive Summary

All conclusions were based on a sample review of medical records; interviews with offenders, health care providers and security staff; and a physical inspection of the institution. This was the third CMA mental health survey of Tomoka Correctional Institution (TOMCI).

The institution, constructed in 1981, is a minimum to close custody facility housing psychological grade S1, S2 and S3 male offenders. At the time of the survey, TOMCI housed 1,091 offenders with 72 classified as psychological grade S2 and 486 as S3. The institution operates a substance abuse treatment program (Tier IV) and a satellite substance abuse treatment center, "Reality House" at which 72 offenders reside. Sixty-two offenders were in disciplinary or administrative confinement and 40 were in protective management at the time of the survey.

Overall, findings were positive in the current survey. It appeared that there were no access barriers to offenders obtaining mental health services and offenders receiving services were generally managed in timely and clinically appropriate ways. The majority of offenders felt positively about mental health staff and services. Additionally, the institution should be commended for having on-site mental health staff coverage seven days per week.

A few concerns were noted in the area of clinical management. Attention needs to be directed to the preparation and updating of individualized service plans in order to ensure treatment team and offender participation as well as relevance to offenders' mental health needs. Also of concern are the staffing levels of psychiatrists and psychiatric R.N.s, as they fell below the guidelines of the department's mental health services plan. While, the current survey did not find significantly deficient psychiatric care to be a problem at TOMCI, care could certainly be compromised in the future with inadequate staffing and increasing caseloads.

Mental Health Strengths

1. There was documentation of timely orientation to mental health services in 95% of the records reviewed.
2. The majority of offenders interviewed were satisfied with the quality and availability of mental health services.
3. Offender requests for mental health services were answered in a timely and appropriate manner.
4. Documentation reflected clinically appropriate care for suicidal/self-injurious offenders.
5. Weekend mental health coverage was in place at the institution and appeared to be functioning well to ensure seven day per week access.

Mental Health Citations - Level I

There were no Level I citations identified during this survey.

Mental Health Citations - Level II

Clinical Management/Documentation

1. Several of the individualized service plans were not signed by the offender and/or all treatment team members and the treatment specified in ISPs for three offenders did not appear to be relevant and updated to adequately address their mental health needs.

Mental Health Additional Issues Noted

2. The institution's staffing level of psychiatrists and psychiatric R.N. positions fell below staffing guidelines specified in the department's mental health services plan.
3. Scattered concerns were noted in psychotropic medication management.