

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

in
Bowling Green, Florida

February 22 - 24, 2000

| INSTITUTIONAL STATISTICS PROVIDED CMA ON February 7, 2000 | | | | |
|--|----------------|-------------|-------------------------|------------------------------|
| Population | Custody | Type | Maximum Capacity | Current Occupied Beds |
| Adult | Close | Male | 1174 | 997 |

| MEDICAL GRADES | | | | |
|-----------------------|------------|------------|-----------|-----------------|
| I | II | III | IV | Impaired |
| 665 | 332 | 0 | 0 | 0 |

| "S" GRADES | | | | |
|-------------------|-----------|------------|-----------|-----------------|
| I | II | III | IV | Impaired |
| 953 | 44 | 0 | 0 | 0 |

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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.

Hardee Correctional Institution (HARCI) was established in 1991. The institution provides minimum, medium and close custody levels for a maximum capacity of 1174 adult male offenders. Additionally, there were two satellite units; Hardee Work Camp with a maximum capacity for 288 offenders, and Bradenton Community Correctional Center with a maximum capacity for nine offenders. According to the pre-survey questionnaire (PSQ) prepared by the institution on February 7, 2000, the health care unit at this institution was serving a total of 1275 offenders with medical/psychological grades one through two.

The Correctional Medical Authority (CMA) previously surveyed this institution on March 11 – 13, 1997. The survey findings for physical health listed two Level I citations, three Level II citations, and one additional issue. The survey findings for mental health listed one Level I citation, one Level II, and three additional issues. On December 30, 1997, CMA staff returned to assess corrective actions taken on identified issues. The closure files reviewed for physical health contained documentation verifying correction on four citations and one additional issue selected for review. The closure files reviewed for mental health contained documentation verifying correction of all citations and issues identified in the report.

In the previous physical health survey the citations were categorized under clinical management, access and administrative. Under clinical management there was evidence that 78% of emergency records reviewed were either missing or contained incomplete documentation of nursing assessment, treatment and follow-up care. Additionally, 89% of infirmary records were missing documentation pertaining to review of systems, physician orders, and vital signs. Under access there was a waiting period of seven months for routine/non-emergency dental services due to the elimination of a staff dentist position.

Administrative concerns involved the process of dental grievances, and the lack of adequate documentation regarding health education.

The prior survey of mental health documented several areas of concern including the deficient clinical management of suicidal offenders, inadequate individual service plans and substance abuse issues. Findings were very positive in the current survey. Offenders clearly knew how to access care, assessments were thorough and timely, treatment plans were individualized with operationally defined and clinically relevant goals and progress notes reflected progress toward the goals. Additionally, psychological grade assignments were appropriately reviewed and changed based on offender needs. Offenders interviewed expressed confidence in the HARCII clinical staff. Staff had implemented an improved triage method for offender requests that received favorable reviews from both offenders and staff. Also, clinical management of suicidal offenders was generally appropriate and there was evidence of excellent coordination and communication between the mental health and substance abuse programs.

The physical health section of this report contains two Level I citations, two Level II citations and two additional issues with some similar to the 1997 survey findings. The mental health section of this report contains no citations, and one additional issue.

PHYSICAL HEALTH CITATIONS

Strengths

1. Eight infirmary records (one admission and seven lay-in/observation) selected for review indicated that assessment, treatment and follow-up care was appropriate.
2. Both seizure records selected for review indicated that assessment, treatment and follow-up care was appropriate.

Citations - Level I

Clinical Management

1. Four (40%) of ten sick call and three (30%) of ten emergency care records reviewed indicated delay in physician referral, and/or inappropriate assessment, treatment and follow-up.
2. Four (40%) of ten asthma, one (33%) of three diabetes, ten of ten (100%) hypertension, three of three (100%) TB/INH prophylaxis and one (14%) of seven general records reviewed lacked either required assessments, test, treatment/follow-up care or contained inconsistent/incomplete documentation.

Citations - Level II

Administration

3. A review of the laboratory log indicated discrepancies and delays between the dates test were ordered and the dates drawn.
4. There was a lack of an adequate tracking system for dispensed medications.

Additional Issues Noted

5. Two oxygen tanks located in the emergency room were stored in a freestanding state, which posed a safety hazard.
6. There was no Spanish version of the offender's handbook.

MENTAL HEALTH CITATIONS

Strengths

1. There was documentation suggesting timely orientation to mental health services in all records reviewed.
2. The majority of offenders interviewed indicated satisfaction with the quality and availability of mental health services.
3. Documentation suggested offender requests for mental health services were answered in a timely and appropriate manner.
4. Responsiveness and innovation on the part of clinical staff was evident in the development of an improved triage procedure for handling offender mental health services requests.
5. Documentation of record screenings and psychological assessments was thorough and timely in all records reviewed.
6. Records of offenders receiving mental health services reflected timely case manager assignments and biopsychosocial assessments in all cases reviewed.
7. Confinement evaluation documentation suggested timely completion in all cases reviewed.
8. Individualized service plans (ISPs) were appropriately completed, timely and relevant to offender needs in all cases reviewed.

9. Offenders were appropriately referred to the substance abuse program and mental health case management notes consistently reflected follow-up on the status and progress of offender participation in substance abuse treatment.

Citations - Level I

There were no Level I citations noted during this survey.

Citations - Level II

There were no Level II citations noted during this survey.

Additional Issues Noted

1. Documentation reflected that offenders on suicide observation status were offered fluids at mealtimes only.