



CORRECTIONAL MEDICAL AUTHORITY

PHYSICAL & MENTAL HEALTH SURVEY

of

MAYO CORRECTIONAL INSTITUTION

in

Mayo, Florida

on

July 13 - 15, 2009

CMA Physical Health Team

Leaders:

Priscilla Wood, BS
Tina Weber, MA

Physical Health Team Members:

Phillip Barkley, MD
Samuel Ferree, DDS
Donna Adair, DNP, MS, ARNP
Steve Tomicich, ARNP
Sue Sims, RN
Ann Panzarino, RN

CMA Mental Health Team Leader:

Jane Holmes-Cain, LCSW

Mental Health Team Members:

Kristen Schmidt, PhD
Heather Allman, LCSW
Mandy Petroski-Moore, LCSW
Cathy Morris, RN

Distributed on July 22, 2009

DEMOGRAPHICS

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

INSTITUTIONAL INFORMATION			
Population	Type	Custody Level	Medical Level
1,611	Male	Close	2

Institutional Potential/Actual Workload

Main Unit Capacity	1,432	Current Main Unit Census	1,315
Work Camp Capacity	307	Current Work Camp Census	296
Satellite Unit(s) Capacity	NA	Current Satellite(s) Census	NA
Total Capacity	1,739	Total Current Census	1,611

Inmates Assigned to Medical/Mental Health Grades

<i>Medical Grade</i>	1	2	3	4	<i>Impaired</i>	
		1,314	287	10	0	0
<i>Mental Health Grade (S-Grade)</i>	<u><i>Mental Health Outpatient</i></u>			<u><i>MH Inpatient</i></u>		
	1	2	3	4	5	<i>Impaired</i>
	1,542	67	2	NA	NA	NA

Inmates Assigned to Special Housing Status

<i>Confinement/ Close Management</i>	DC	AC	PM	CM3	CM2	CM1
		112	42	0	NA	NA

OVERVIEW

Institutional Description

Mayo Correctional Institution (MAYCI) houses male inmates of minimum, medium, and close custody levels and is designated as a medical grade 2, psychological grade 2 facility. Health care services are also provided to Mayo Work Camp.

The overall scope of health services provided at MAYCI 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 observation/infirmarary care as required.

The Correctional Medical Authority (CMA) conducted a thorough review of the medical, mental health and dental systems at MAYCI July 13 - 15, 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.

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

SYSTEM REVIEW

No significant findings were reported regarding the administrative aspects of the institutional health system.

DENTAL REVIEW

There were no dental findings.

CLINICAL REVIEW

There were no significant findings in the chronic illness clinic review.

Discussion: There were several medical records in the endocrine clinic in which there was no recent microalbuminuria testing. While this did not rise to the level of a finding, medical staff is encouraged to review all endocrine clinic medical records to determine if microalbuminuria testing is warranted. According to the HSB, a microalbuminuria will be done if the urine is negative for protein. The staff had already begun this review the day after the survey was completed.

OBIS	
Finding(s)	Suggested Corrective Action(s)
<p>PH-1: In ten out of ten records, the problem list on the left side of the record was incomplete.</p>	<p>Provide in-service training to staff regarding the issue(s) identified in the Finding(s) column.</p> <p>Create a monitoring tool and conduct monthly monitoring of no less than ten records 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 the CMA corrective action plan assessment.</p>

CONCLUSION

Survey findings indicated the overall medical care provided at MAYCI falls within department standards and adequately reflected standards commensurate with the professional health care community at large. Medical records were very well organized, data entry efforts were timely and accurate, and administrative documents were appropriately maintained. Review of the medical area, inmate housing, and food service revealed no negative findings.

The inmates interviewed were satisfied with their care and security staff was aware of how inmates can access care. It was also evident that security staff works well with medical staff to ensure inmates receive the care they need. Overall, the clinic staff, including medical and administrative, demonstrated their dedication to providing health care to the inmate population.

MENTAL HEALTH FINDINGS

OVERVIEW

Mayo 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 MAYCI:

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

CLINICAL REVIEWS

Use of Force	
Finding(s)	Suggested Corrective Action(s)
<p>MH-1: In one of four records reviewed, there was no referral to mental health after a use of force incident. (see discussion)</p>	<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 S2 records that contain a use of force incident monthly for compliance or all if less than ten records are available. 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>

Discussion MH-1: The requirement for nursing to send a referral to mental health is only applicable for S2 or higher inmates. At the time of the survey, there was only one S2 record available for review. The other three records reviewed were for S1 inmates. The S2 record did not contain evidence that mental health was notified after a use of force incident and the inmate was not seen by mental health until 16 days after the occurrence. Staff report that this has been an on-going issue.

CONCLUSION

The Mayo Correctional Institution mental health department consists of one full time Sr. Behavioral Analyst and one full time Behavioral Specialist. Assessments are thorough, individualized and timely. Progress notes reflect the inmate's progress toward his treatment goals. Inmates and medical and security staff had positive comments regarding the mental health department. The Behavioral Specialist and the Sr. Behavioral Analyst seem to work well together. Surveyors noted that they both have a particularly caring attitude towards the inmates and that they seem to strive to provide quality mental health care for them. They are to be commended for the lack of findings in this report.

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.