

OKALOOSA C.I. SUPPLEMENTAL REPORT

For CMA Survey Conducted February 5-8, 2002

PHYSICAL AND MENTAL HEALTH SURVEY FINDINGS REQUIRING OHS INTERVENTION

In addition to the survey findings of Okaloosa C.I. referenced in the main body of the survey report (which fall within the scope of the institutional staff to correct), there were two further areas of concern related to mental health. These findings are based on standards adopted by the CMA, but not addressed in OHS policy, procedure, or directive, or on other issues beyond institutional control. Therefore, corrective actions at the institutional level can be initiated only by or with the authority or intervention of the OHS.

The items listed below identify the finding, the name of the audit instrument used by the CMA surveyors and the specific screen number, if applicable, and what criteria were used to determine the standard was not met.

MENTAL HEALTH

- 1. The physician's orders did not specify observations at least every 15 minutes for inmates being observed for suicidal/self-injurious behavior in alternate medical housing cells.** This standard is referenced in the CMA Self-Injury/Suicide Prevention Record Review Instrument, Screen 15 and is based on national correctional healthcare standards and prevailing professional practices in the community at large.
- 2. Existing suicide/self-injury policy and procedures related to Alternate Medical Housing Status and 23-Hour Observation Status provides inadequate guidance to clinical staff at the institutional level. Resulting documentation was disjointed and failed to clearly portray the events and interventions provided by institutional staff.** This standard is referenced in the CMA Self-Injury/Suicide Prevention Systems Screens Instrument, Screen 1 – "There is a written suicide/self-injury prevention policy/procedure that is detailed and clearly outlines policies and procedures for use with inmates considered to be at risk of suicide and self-harm, regardless of assessed motivation of the inmate (i.e., manipulative vs. mental health reasons)." Note: The use of 23-Hour Observation Status has not been assessed since the 1/23/02 revision of T.I. 15.03.26, *Infirmary Services*.

PHYSICAL HEALTH

There were no OHS findings specifically related to physical health. However, suicide and self-injury prevention is clearly a responsibility of all health care and correctional staff as noted in the body of the report.