

CORRECTIONAL MEDICAL AUTHORITY (CMA)

PHYSICAL & MENTAL HEALTH SURVEY

OF

POLK CORRECTIONAL INSTITUTION

in

Polk City, Florida

September 26 – 28, 2000

INSTITUTIONAL STATISTICS PROVIDED CMA ON June 9, 2000				
Population	Custody	Type	Maximum Capacity	Current Occupied Beds
Adult	Close	Male	1050	1159

MEDICAL GRADES				
I	II	III	IV	Impaired
648	346	181	13	53

"S" GRADES				
I	II	III	IV	Impaired
1158	27	0	0	0

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Paul R. Cornish

CMA Mental Health Team Leader:

Paul R. Cornish

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Executive Summary

This was the fourth Correctional Medical Authority survey of Polk Correctional Institution, a close custody level Department of Corrections facility. During previous surveys of Polk, much attention had been given by the authority to inadequacies in the institution's medical building. Consistently, concerns were expressed by members of survey teams that the size and design of the building did not lend itself to the most efficient use of resources. Once again, survey team members drew the same conclusion. This problem, coupled with the identification of numerous inadequacies in the way inmate health care is assessed and/or conducted, resulted in a number of negative survey findings.

Physical Health

Survey results suggest the provision of health services at the institution, although adequate in many areas, could be improved overall by ensuring assessments and treatment decisions based on those assessments adhere more closely to established departmental and community-based policies and procedures. This also applies to the appropriate medical records' documentation of those same assessments and treatment. Although it is recognized several nursing staff vacancies currently exist and those vacancies are currently being filled with temporary agency nurses, this does not, in itself, excuse the department from its responsibility to provide an adequate standard of care or to ensure medical record documentation is timely, complete, and accurate.

On a positive note, however, several areas reviewed during the survey were identified as being particularly noteworthy. These included miscellaneous institutional documentation, including logs, policies and procedures manuals, health service bulletins, credentialing information, training records, etc., which were noted to be very well organized. The dental clinic, although small, was otherwise very clean and particularly well organized. Finally, records reviewed from the Asthma and General Medicine Clinics were found to reflect care appropriate for the inmate's chronic medical condition.

Mental health

Polk Correctional Institution has maintained a stable and well functioning mental health program since 1994. This is particularly commendable considering the institution changed its mission to house all levels of close management offenders during this time.

Records reviewed during the current survey evidenced all required clinical standards of care. Furthermore, mental health documentation was well organized, legible and complete. The mental health staff is stable and experienced

Overall Findings

Overall, the physical and mental health deficiencies, concerns, and issues noted during the survey of Polk Correctional Institution resulted in the issuance of the following citations:

	<u>Physical Health</u>	<u>Mental Health</u>
Level I	2	0
Level II	7	0
Additional Issues	0	0

Physical Health

Strengths

1. Although small, the dental clinic was very clean and well organized.
2. Institutional documentation, including logs, policy and procedure manuals, health service bulletin, credentialing information, etc. reviewed during the survey were complete and well organized.
3. Nursing and security staff training folders reviewed during the survey were well organized and maintained.
4. The assessments, treatments, and/or continuity of care plans documented in the asthma and general medicine clinics records reviewed appeared appropriate for the inmate's chronic medical condition.

Citations - Level I

Clinical Management/Documentation

1. Six of eight (75%) sick call records and five of nine (56%) emergency care records reviewed reflected either poorly completed assessments of the inmate's complaint or lacked critical components necessary for treatment decisions; i.e., physical and/or neurological examinations, specialty consultations, vital signs, visual acuity tests, etc.

Administrative

2. The institution's medical building appeared inadequate in size and design to efficiently meet the needs of the inmate population.

Citations - Level II

Clinical Management

3. Five of eight (63%) sick call records, seven of nine (78%) emergency care records, and three of seven (43%) infirmary records reflected documentation omissions; i.e., times and/or dates of emergency events, daily physician/CA progress notes and/or weekend telephone rounds, signature stamps/printed names of health care providers, etc.
4. Concerns related to a lack of consistent documentation of vascular assessments of the extremities were noted in three of five diabetes clinic records reviewed (60%). Additionally, two of five records (40%) lacked evidence that insulin dependent inmates had been provided instructions on self-administration of the medication.
5. Concerns related to the timeliness of scheduled annual/biennial health appraisals and the documentation of current health status were noted in three of five records reviewed (60%).
6. Five of seven hypertension clinic records reviewed (71%) lacked specific documentation of an inquiry into possible medication side effects.
7. Concerns regarding the documentation of positive skin test results and/or INH prophylaxis on the master problem list, the recording of INH start dates on the DC4-710, and/or overdue laboratory tests were revealed in three of three TB/INH therapy clinic records reviewed (100%).
8. Concerns were noted in each of the three seizure clinic records reviewed (100%) related to the consistent documentation of neurological examinations and the documentation of evaluations for medication side effects.

Administrative

9. All required mock code drills had not been conducted and critiqued quarterly as required.

Additional Issues Noted

No Additional Issues were identified during the survey.

Mental Health

Strengths

1. The mental health staff is stable and experienced.
2. The mental health documentation is well organized and complete, thus serving as a superior tracking mechanism for internal and outside review.
3. The records reviewed evidenced all required clinical standards of care.

Citations - Level I

There were no Level I citations noted in the survey.

Citations - Level II

There were no Level II citations noted in the survey.

Additional Issues Noted

There were no Additional Issues noted in the survey.