

**CORRECTIVE ACTION PLAN ASSESSMENT**

of

Santa Rosa Correctional Institution  
**CLOSE MANAGEMENT**

held on

February 26-27, 2004

for the

Close Management Survey  
Conducted July 22-25, 2003

**CMA Staff**

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## **Corrective Action Plan Assessment of Santa Rosa CI Close Management**

### **I. Overview**

On July 22-25, 2003, the Correctional Medical Authority (CMA) concluded a close management (CM) survey of Santa Rosa Correctional Institution (SARCI). The survey report, detailing the findings of the survey team, was distributed on August 28, 2003. The CMA received the final corrective action plan (CAP) on September 3, 2003. On February 26-27, 2004, CMA staff and a consultant surveyor conducted a corrective action plan assessment visit to the institution. During the assessment, corrective action files maintained by the institution were reviewed for evidence of in-service training and on-going monitoring indicating correction of the findings. Additionally, a sample of medical records was reviewed and staff and inmates were interviewed to provide additional confirmation of corrective activities.

### **II. Results**

Mental health staffing at the time of this assessment consisted of 12 psychological specialists and one psychologist (one psychologist position was vacant). Psychiatric coverage was being provided three days per week by a psychiatrist who was also assigned to Washington CI. There were only 73 S3 inmates and approximately 60 S2 inmates at the time of this assessment.

It should be noted that due to the greatly diminished S3 population (most are quickly transferred to Florida State Prison or Union CI), mental health staff now have the ability to work more intensively with the S1 close management population, particularly those S1 inmates who have been in close management for many months to years and are nearing end-of-sentence as well as those CM inmates who are also in disciplinary confinement (DC) status. Data reviewed during the assessment visit revealed that of the close management inmates at SARCI, almost one-quarter were also in DC status for disciplinary offenses committed while in close management. According to staff, while in DC status, CM inmates lose certain of the privileges granted by the Osterback Final Order of Judgment. At the time of the assessment visit, of the 267 CM-1 inmates, 90, or 33%, were also in DC status. Of the 288 CM-2 inmates, 61, or 21% and 66 of the 398 CM-3 inmates, or 17%, were in DC status.

While all specific findings from the original survey were determined to have been corrected, staff are encouraged to work with the S1 and DC populations discussed above to identify any latent or developing mental illnesses so that appropriate therapeutic interventions can occur.