

### April 2013 YUMA COMPLEX

Intake (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Is a physical examination completed by a Medical Provider by day two of an inmate's arrival at the facility? (Alhambra, Eyman D/R, Perryville, Tucson Minors only)[P-E-04, DO 1104, HSTM, Chapter 5, Sec. 2.0, 2.1]	X			4/26/2013 5:40 PM Entered By: Kathy Campbell N/A. Yuma is not an intake facility.	2
2	Is a mental health assessment completed by a Mental Health Practitioner by day two of an inmate's arrival at the facility? (Alhambra, Eyman D/R, Perryville, Tucson Minors only)[P-E-04,P-E-05, DO 1104, HSTM, Chapter 5, Sec. 2.0, 2.1]	X			4/26/2013 5:40 PM Entered By: Kathy Campbell N/A. Yuma is not an intake facility.	2

**April 2013 YUMA COMPLEX**

<b>Sick Call (Q)</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Is sick call being conducted five days a week Monday through Friday (excluding holidays)? P-E-07, DO 1101, HSTM Chapter 5, Sec. 2.04.2, Chapter 7, Sec. 7.6]	█	X	█	<p>4/5/2013 1:41 PM Entered By: Patricia Arroyo Sick call is not being conducted five days a week</p> <p>4/26/2013 6:28 PM Entered By: Kathy Campbell Not in compliance on multiple yards- See comments.</p> <p>4/26/2013 5:41 PM Entered By: Kathy Campbell Cocopah- (Green) sick call is being conducted 5 days/week. La Paz-(Amber) sick call had been being conducted 5 days/week up until last week.</p>	1
2	Are sick call inmates being triaged within 24 hours(or immediately if inmate is identified with emergent medical needs)? [P-E-07, DO 1101, HSTM Chapter 5, Sec. 3.1]	█	X	█	<p>4/5/2013 1:44 PM Entered By: Patricia Arroyo These inmates are at Cibola Unit:</p> <p>4/5/2013 1:43 PM Entered By: Patricia Arroyo These inmates are at Cibola Unit</p> <p>4/5/2013 1:43 PM Entered By: Patricia Arroyo inmate ██████ - HNR submitted on 3/28/13. Seen on NL 4/2/13 for back pain. inmate ██████ - HNR submitted on 3/28/13, seen on NL 4/2/13 for lower bunk. inmate ██████ - HNR submitted on 3/29/13, seen on NL 4/2/13 for lower bunk, inmate ██████ - Submitted HNR on 3/30/13 for dressing change&amp; change of pain medication. Seen on NL 4/2/13. inmate ██████ - Submitted HNR on 3/27/13 for abdominal pain. Refused visit on 4/2/13. Medical did not meet time frame for issue. inmate ██████ - HNR submitted on 3/28/13, for long sleeve shirts Hx of Cancer. Inmate seen 4/2/13. Time frame is not being met.</p> <p>4/26/2013 6:28 PM Entered By: Kathy Campbell Not in compliance on multiple yards- See below comments.</p> <p>4/26/2013 6:06 PM Entered By: Kathy Campbell inmate ██████ -(Amber) Multiple inmates found out of compliance with timeframe of sick call. Below are a small sample. inmate ██████ - HNT triaged 4/1/13, was not seen as of 4/15/13. inmate ██████ - HNR triaged 4/5/13 for keen pain and swelling, not seen as of 4/15/13. inmate ██████ -HNT triaged 4/7/13, not seen as of 4/15/13. inmate ██████ -HNR triaged 4/7/13, no note since 1/21/13.</p>	1

April 2013 YUMA COMPLEX

				<p>4/26/2013 5:52 PM Entered By: Kathy Campbell          La Paz- Multiple inmates found out of compliance. Below are a small sample. (Amber)          inmate [redacted] - HNR triaged 3/31/13, but was not seen until 4/3/13.          inmate [redacted] - HNR triaged 4/11/13, still not seen as of 4/26/13.          inmate [redacted] - HNR triaged 4/11/13, still not seen as of 4/26/13.          inmate [redacted] - HNR marked "Emergency" triaged 3/31/13, still not seen as of 4/26/13.          inmate [redacted] - HNR triaged 3/23/13, not seen until 4/7/13.</p> <p>Per NCCHC P-E-07, non-emergency requests are to be reviewed within 24 hours and the inmate seen by a qualified health care professional at sick call within the next 24 hours (72 hours on weekends).</p>	
3	<p>Are vitals signs, to include weight, being checked and documented each time an inmate is seen during sick call? [P-E-04, HSTM Chapter 5, Section 1.3]</p>		X	<p>4/5/2013 1:45 PM Entered By: Patricia Arroyo          Cibola Unit</p> <p>4/5/2013 1:44 PM Entered By: Patricia Arroyo          Vital signs are being done.</p> <p>4/26/2013 6:29 PM Entered By: Kathy Campbell          Not in compliance on multiple yards- See below.</p> <p>4/26/2013 6:12 PM Entered By: Kathy Campbell          Dakota (Amber)          Multiple notes found without weights/vital signs during sick call. Below are examples.          inmate [redacted] - Nursing note of 3/28/13 without weight.          inmate [redacted] - Nursing note 4/12/13 without vital signs and weight.          inmate [redacted] - 4/13/13 0800 nursing note without HR.          inmate [redacted] - 3/25/13 nursing note without weight.</p> <p>4/26/2013 6:02 PM Entered By: Kathy Campbell          La Paz-(Amber) Multiple notes found without weight or vital signs during sick call. Below are some examples of those charts-          inmate [redacted] - 4/13/13 Nursing note without weight.          inmate [redacted] - Nursing Protocol dated 4/11/13 without weight.          inmate [redacted] -Nursing Protocol dated 3/18/13 without weight.          inmate [redacted] - 4/19/13 note without weight.</p> <p>Per the contract (Solicitation #ADOC12-00001105; Sec. 2.20.2.2) every inmate's vital signs shall be checked and documented on the appropriate assessment form each time they attend sick call. Per NCCHC P-E-04, vitals signs are include the</p>	1

**April 2013 YUMA COMPLEX**

				patient's weight.	
4	Is the SOAPE format being utilized in the inmate medical record for encounters? [DO 1104, HSTM Chapter 5, Section 1.3]		X	<p>4/5/2013 1:45 PM Entered By: Patricia Arroyo Cibola Unit: inmate ██████ amber SOAPE was not utilized</p> <p>4/26/2013 6:29 PM Entered By: Kathy Campbell Not in compliance on multiple yards- See below.</p> <p>4/26/2013 6:15 PM Entered By: Kathy Campbell Dakota- (Green) Of the charts reviewed. All presented with SOAPE format. La Paz-(Amber). Several charts reviewed without SOAPE format. Below are just a couple of examples. inmate ██████ - 4/19/13 without SOAPE format. Also 4/18/13 2125 note without SOAPE format. Under the terms of the contract (Solicitation #ADOC12-00001105; Sec. 2.20.2.2) all sick call entries are documented in the medical record utilizing the "Subjective- Objective- Assessment- Plan -Education" (SOAPE) format.</p>	1
5	Are referrals to providers from sick call being seen within seven (7) days? [P-E-07]		X	<p>4/5/2013 1:47 PM Entered By: Patricia Arroyo Cibola Unit: inmate ██████ -SNO written until 6/13 by Nurse not in policy. A nurse can only write a SNO for three days. inmate ██████ -SNO was issued without provider review until 4/14 not in policy. A nurse can only write a SNO for 3 days.</p> <p>4/26/2013 6:30 PM Entered By: Kathy Campbell Not in compliance on multiple yards- see below.</p> <p>4/26/2013 6:20 PM Entered By: Kathy Campbell La Paz (Amber)- Of the ten charts reviewed, two were referred to Provider line and not seen within seven (7) days. inmate ██████ - 3/13/13 note referred to Provider, but no note as of 4/26/13. inmate ██████ - 4/1/13 note referred to Provider, but Provider only co-signed note, never documented that she saw inmate. Dakota (green)- of the ten charts reviewed, three were referred to Provider line and seen in timely manner.</p>	1
6	Are nursing protocols in place and utilized by the nurses for sick call?		X	<p>4/5/2013 1:47 PM Entered By: Patricia Arroyo Cibloa Unit: inmate ██████ protocol not utilized inmate ██████ protocol not utilized</p>	1



## April 2013 YUMA COMPLEX

Corrective Plan: At this time we are using the NETs which hopefully eliminate this deficiency. We will also research and address the patients that are mentioned in this deficiency. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### **5 Are referrals to providers from sick call being seen within seven (7) days? [P-E-07]**

**Level 1 Amber User: Kathy Campbell Date: 4/26/2013 6:30:04 PM**

Corrective Plan: We are in the process of building our Provider Staff. When we have more than one provider, this will ensure that our patients will be seen in accordance with the standards and in a timely fashion. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### **6 Are nursing protocols in place and utilized by the nurses for sick call?**

**Level 1 Amber User: Kathy Campbell Date: 4/26/2013 6:30:25 PM**

Corrective Plan: With the NETs in place, these address the nursing protocols that are in place and utilized by the nurses during Sick Call. We will re-inforce this and document our training regarding emergency nursing care, health maintenance and prevention at the next Nurses' Staff Meeting.  
6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**April 2013 YUMA COMPLEX**

<b>Medical Specialty Consultations (Q)</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Are urgent consultations being scheduled to be seen within thirty (30) days of the consultation being initiated? [CC 2.20.2.3]	X			<p>4/24/2013 11:27 AM Entered By: Patricia Arroyo</p> <p>4/26/2013 6:34 PM Entered By: Kathy Campbell Cocopah- (Green)- No Urgent consults noted. La Paz- (Green)- No Urgent consults noted. Dakota- (Green)- No Urgent consults noted.</p>	2
2	Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]		X		<p>4/24/2013 11:28 AM Entered By: Patricia Arroyo Cheyenne Unit: inmate [redacted] Urology consult 4/17/13. Dictated note not in chart. Practitioner Consultation Report has not been reviewed by provider as of to date 4/25/13. inmate [redacted] Urology 4/17/13, Dictated note not in chart. Practitioner Consultation Report has not been reviewed by provider as of to date 4/25/13. Urology is requesting Repeat CT scan of pelvis/abd, ASAP CBC;BMP;PSA;ASAP, Urine C&amp;S ASAP, Septda ½ tab po daily. F/U with Urology ASAP when complete. Amber inmate [redacted]: Urology Scrotal Edema, Dictated note not in the chart, Not reviewed by provider in time frame. inmate [redacted]: Ortho consult for DJD of L-spine, Ortho requesting MRI prior to visit. Has not been ordered. Provider has not reviewed request.</p> <p>4/26/2013 6:36 PM Entered By: Kathy Campbell Dakota (Amber) Of the three charts found to have outside consult reports, one chart found out of compliance- inmate [redacted] - 3/21/13 abnormal lab not reviewed until 4/15/13 and Provider was not notified of abnormal lab by nurse prior to being reviewed. La Paz (Green)- Of the four charts found to have outside consult reports, all found in compliance. Cocopah (Green)- of the three charts found to have outside consult reports, all found in compliance.</p>	2
3	Is the utilization and availability of off-site services appropriate to meet medical, dental and mental health needs? [CC 2.20.2.3]		X		<p>4/24/2013 11:29 AM Entered By: Patricia Arroyo Physical therapy is not contracted</p> <p>4/26/2013 6:39 PM Entered By: Kathy Campbell Cocopah (Green) Dakota (Green)</p>	3

## April 2013 YUMA COMPLEX

		X			La Paz (Green) The above yards seem to utilize the availability of off-site services to appropriate to meet the health care of the inmates.	
4	Are the emergent medical needs of the inmates appropriate and emergent transports ordered in a timely manner? [P-E-08, CC 2.20.2.3]	X			4/24/2013 11:29 AM Entered By: Patricia Arroyo  4/26/2013 6:40 PM Entered By: Kathy Campbell Cocopah (Green) Dakota (Green) La Paz (Green) The above yards are meeting the emergent needs of inmates appropriate and emergent transports.	2
5	Do all inpatient admissions have documented utilization review of admission and evidence of discharge planning? [CC 2.20.2.3]	X			4/29/2013 7:50 PM Entered By: Kathy Campbell  4/26/2013 6:41 PM Entered By: Kathy Campbell Cocopah (Green)- N/A. No admissions noted. Dakota (Green) La Paz (Green) The above yards found to have inpatient admissions with documentation of utilization review/notes of admission and discharge plan.	2

### Corrective Action Plans for Performance Measure: Medical Specialty Consultations (Q)

**2 Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]**  
**Level 2 Amber User: Kathy Campbell Date: 4/26/2013 6:36:59 PM**

Corrective Plan: We are in the process of building our Provider Staff. When we have more than one provider, this will ensure our patients' referrals will be reviewed in a timely manner. We will research and address the MGAR finding to see how this fell out of compliance. We will also review this with our Nursing Staff to make sure the provider can review in a timely fashion. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**2 Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]**  
**Level 2 Amber User: Patricia Arroyo Date: 4/24/2013 11:28:51 AM**

Corrective Plan: We will discuss with the Clinical Co-Ordinator the pitfalls of why we can't get the reports back in a timely fashion. Then, we figure out how to get over/around those pitfalls so we can have our patients taken care of in a timely fashion. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**3 Is the utilization and availability of off-site services appropriate to meet medical, dental and mental health needs? [CC 2.20.2.3]**

**Level 3 Amber User: Patricia Arroyo Date: 4/24/2013 11:29:16 AM**

Corrective Plan: At this time, the Corizon Team is attempting to recruit outside providers for use by our patients. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

April 2013 YUMA COMPLEX

Chronic Condition and Disease Management (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are treatment plans developed and documented in the medical record by a provider within thirty (30) days of identification that the inmate has a CC? [P-G-01, CC 2.20.2.4]	X			<p>4/24/2013 11:27 AM Entered By: Patricia Arroyo</p> <p>4/5/2013 1:38 PM Entered By: Patricia Arroyo Treatment plans are developed and documented in the medical record by a provider within 30 days</p>	1
2	Are CC inmates being seen by the provider (every three (3) to six (6) months) as specified in the inmate's treatment plan? [P-G-01, DO 1101, HSTM Chpt. 5, Sec. 5.1, CC 2.20.2.4]		X		<p>4/24/2013 11:25 AM Entered By: Patricia Arroyo Cheyenne Unit: inmate [REDACTED]: Cardiac, Open heart surgery in 2005, Valve repair? on problem list. Inmate has not been seen for CC. Cardiology dictated notes are not in the chart. Inmate has not been for CC. inmate [REDACTED], HTN, Hep C, Seizures, seen 7/12, due 1/13</p> <p>4/5/2013 1:50 PM Entered By: Patricia Arroyo Cibloa Unit: inmate [REDACTED] - HTN, Asthma, last seen 4/12/12, past due inmate [REDACTED] - HTN, seen 8/12, due 11/12 past due inmate [REDACTED] - HTN, seen 6/12, due 12/12 past due</p> <p>4/27/2013 4:41 PM Entered By: Kathy Campbell Dakota and La Paz (Amber)- CC Inmates are not being seen by Provider every 3-6 months as specified in the inmate's treatment plan. La Paz is currently 3-4 months behind. Chronics last seen in January 2013. Below are some examples- inmate [REDACTED] - cc last done 10/17/12 with 180 day follow up. Was due 3/17/13, still not seen as of 4/15/13. inmate [REDACTED] - Arrived 2/7/13 with cc HTN, Hep C seen. Was last seen 6/7/12 for cc visit. inmate [REDACTED] - HTN; Hep C. Seen 1/14/13 with 90 day follow up, not seen as of 4/15/13. inmate [REDACTED] - cc Cardiac. Last seen 1/7/13 with 90 day follow up, has not been seen as of 4/15/13. inmate [REDACTED] - Seen 1/29/13 with 90 day follow up for DM; HTN. Not seen as of 4/26/13. inmate [REDACTED] - HTN, last seen 7/24/12 with 6 month follow up. No seen as of 4/26/13. inmate [REDACTED] inmate [REDACTED] - Asthma- seen 7/3/12 with 6 month follow up. Not seen as of 4/26/13. inmate [REDACTED] inmate [REDACTED] inmate [REDACTED] inmate [REDACTED] inmate [REDACTED] inmate [REDACTED] and inmate [REDACTED] - All overdue for chronic care visits.</p>	2

## April 2013 YUMA COMPLEX

3	Are CC/DM inmates being provided coaching and education about their condition / disease and is it documented in the medical record? [P-G-01, CC 2.20.2.4]	X	X	<p>4/24/2013 11:26 AM Entered By: Patricia Arroyo                  cheyenne Unit:                  inmate not documented                  inmate not documented</p> <p>4/5/2013 1:51 PM Entered By: Patricia Arroyo                  Cibola Unit:                  Inmates are being coached and educated about their disease process</p>	1
4	Have disease management guidelines been developed and implemented for Chronic Disease or other conditions not classified as CC? [P-G-01, HSTM Chpt. 5, Sec. 5.1, CC 2.20.2.4]	X	X	<p>4/5/2013 1:52 PM Entered By: Patricia Arroyo                  Disease management guidelines have been developed and implemented for Chronic Care Disease and other disease processes</p> <p>4/29/2013 7:50 PM Entered By: Kathy Campbell</p>	2
5	Has the contractor submitted his/her quarterly guideline audit results by the 15th day following the end of the reporting quarter? [CC 2.20.2.4]	X	X	<p>4/5/2013 1:53 PM Entered By: Patricia Arroyo                  Report is due this month</p> <p>4/27/2013 4:42 PM Entered By: Kathy Campbell                  N/A</p>	2

### Corrective Action Plans for Performance Measure: Chronic Condition and Disease Management (Q)

**2 Are CC inmates being seen by the provider (every three (3) to six (6) months) as specified in the inmate's treatment plan? [P-G-01, DO 1101, HSTM Chpt. 5, Sec. 5.1, CC 2.20.2.4]**

**Level 2 Amber User: Patricia Arroyo Date: 4/24/2013 11:25:22 AM**

Corrective Plan: We are in the process of building our Provider Staff. When we have more than one provider, this will ensure that our Chronic Care Patients will be seen in a timely manner. We will also send this information to the Cheyenne and Cibola Unit for follow up to ensure compliance.

Corrective Actions: See above

**2 Are CC inmates being seen by the provider (every three (3) to six (6) months) as specified in the inmate's treatment plan? [P-G-01, DO 1101, HSTM Chpt. 5, Sec. 5.1, CC 2.20.2.4]**

**Level 2 Amber User: Kathy Campbell Date: 4/27/2013 4:41:38 PM**

Corrective Plan: We are in the process of building our Provider Staff. When we have more than one provider, this will ensure that our Chronic Care Patients will be seen in a timely manner. We will also send this information to the LaPaz and Dakota Units for follow up to ensure compliance. 5/31/2013 Cyndy Hale FHA

Corrective Actions: See above.

**3 Are CC/DM inmates being provided coaching and education about their condition / disease and is it documented in the medical record? [P-G-01, CC 2.20.2.4]**

**Level 1 Amber User: Patricia Arroyo Date: 4/24/2013 11:26:29 AM**

Corrective Plan: Since the NETs forms have come into effect, we hope to ensure that our patients are being educated about their Chronic Care Condition. At the next Nurses' Meeting we will again bring up the importance of documentation regarding education. 5/31/2013 Cyndy Hale FHA

## **April 2013 YUMA COMPLEX**

Corrective Actions: See above.

April 2013 YUMA COMPLEX

Medical Records (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are medical records current, accurate and chronologically maintained with all documents filed in the designated location? [NCCHC Standard P-H-01]		X		4/27/2013 3:57 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz- Amber. Charts not accurate and not in chronologically order on the above yards. Old and new HNRs, some addressed and some still waiting to be addressed were noted inside the front of charts. Loose labs noted, along with outside consult reports loose in charts. Inmate [REDACTED], consult request from 4/25/13 still loose in front of chart on 4/26/13. Still has order not noted by staff. Inmate [REDACTED] - 4/9/13 and 4/23/13 HNRs still in front of the chart, marked "nurse line". Still not seen as of 4/26/13. Inmate [REDACTED] - Original HNR dated 2/19/13, that was addressed 2/21/13 still in front of the chart. Inmate [REDACTED] - TB Symptomatology form loose in chart.	1
2	Are provider orders noted daily with time, date and name of person taking the orders off? [NCCHC Standard P-H-01; HSTM Chapter 5, Section 7.0]		X		4/27/2013 3:58 PM Entered By: Kathy Campbell Inmate [REDACTED] - Consultation Report/Order from 4/25/13 still not take off on 4/26/13 at 1330 for presumed dx of cancer. Large masses on trunk, R groin and L eyelid.	1
3	Does the Medication Administration Record (MAR) in the medical chart reflect dose, route, frequency, start date and nurse's signature? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]		X		4/27/2013 4:05 PM Entered By: Kathy Campbell La Paz, Dakota and La Paz- (Amber) Multiple MARs not completed in correct fashion. Below are a sample of those MARs- Inmate [REDACTED] - Ibuprofen filled out as "Ibu 800 mg po BID prn". Ibuprofen was abbreviated, no start date and no Provider name. Inmate [REDACTED] - Coumadin 14 mg po daily x 6 M. Inmate [REDACTED] - "Effexor 75mg" no route, etc. These have been brought to the attention of the DON and Site Manager as they are being found.	1
4	Are medical record entries legible, and complete with time, name stamp and signature present? [HSTM Chpt. 5, Section 6.4, CC 2.20.2.5]		X		4/27/2013 4:14 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Amber)- Multiple entries without legible name and no name stamp/printed name utilized. Below are some examples- Inmate [REDACTED] - Nursing Note of 4/12/13 with illegible signature. Gomes #Inmate [REDACTED] - 3/26/13 note with illegible signature. Inmate [REDACTED] - 4/8/13 note without legible signature. Inmate [REDACTED] - 4/1/13 note without legible signature.	1

### April 2013 YUMA COMPLEX

5	Are arrival logs maintained and kept current with name of inmate, ADC #, date of arrival, # of volumes?	X			4/29/2013 7:49 PM Entered By: Kathy Campbell  4/27/2013 4:14 PM Entered By: Kathy Campbell	1
6	Are departure logs maintained and kept current with name of the inmate, ADC #, unit being transferred to, date of departure, # of volumes?	X			4/29/2013 7:49 PM Entered By: Kathy Campbell  4/27/2013 4:14 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Green)	1
7	Are previous (old) volumes filed in a separate location (not with active files) and easily accessible to obtain as needed?	X			4/29/2013 7:49 PM Entered By: Kathy Campbell  4/27/2013 4:15 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Green).	1
8	Are medical records for released inmates pulled from the active file area?	X			4/29/2013 7:50 PM Entered By: Kathy Campbell  4/27/2013 4:15 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Green).	1
9	Are requested archived medical records merged with newly established medical records upon an inmates return to ADC?	X			4/29/2013 7:50 PM Entered By: Kathy Campbell  4/27/2013 4:15 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Green).	1
10	Is a Release of Information log maintained that reflects the Medical Records Requests for 3rd parties (attorney and family requests only)?	X			4/29/2013 7:50 PM Entered By: Kathy Campbell  4/27/2013 4:15 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz (Green).	1

## April 2013 YUMA COMPLEX

### Corrective Action Plans for Performance Measure: Medical Records (Q)

**1 Are medical records current, accurate and chronologically maintained with all documents filed in the designated location? [NCCHC Standard P-H-01]**

**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 3:57:11 PM**

Corrective Plan: The Medical Records Supervisor will conduct a meeting regarding these concerns and how we can resolve them in a timely manner. We will keep a record of the instructional meeting for the Medical Records Departmental Staff. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**2 Are provider orders noted daily with time, date and name of person taking the orders off? [NCCHC Standard P-H-01; HSTM Chapter 5, Section 7.0]**

**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 3:58:36 PM**

Corrective Plan: We will work with our Nursing Staff to ensure that taking orders off is done in a timely fashion. This will be re-inforced at the next Nurse's Meeting. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**3 Does the Medication Administration Record (MAR) in the medical chart reflect dose, route, frequency, start date and nurse's signature? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]**

**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 4:05:07 PM**

Corrective Plan: The Nursing Staff has been instructed on how to fill out the MARs appropriately. We will again bring how important proper documentation is warranted at the next Nurse's Staff Meeting. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**4 Are medical record entries legible, and complete with time, name stamp and signature present? [HSTM Chpt. 5, Section 6.4, CC 2.20.2.5]**

**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 4:14:22 PM**

Corrective Plan: At this time, our whole staff have acquired printed name stamps. We will re-iterate how important it is to be able to read who documented the note. We will re-iterate this also at the next Nurse's Staff Meeting. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**April 2013 YUMA COMPLEX**

<b>Prescribing Practices and Pharmacy (Q)</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Are recommendations made by the Pharmacy and Therapeutics Committee appropriately enacted? [CC 2.20.2.6]	<b>X</b>			4/26/2013 10:40 AM Entered By: Kathy Campbell	<b>2</b>
2	Are pharmacy polices, procedures forms, (including non-formulary requests) being followed? [NCCHC Standard P-D-01, CC 2.20.2.6]		<b>X</b>		<p>4/26/2013 10:23 AM Entered By: Leslie Boothby HSTM 4.1.6</p> <p>1. Amber – will remain amber until a written corrective action plan is received and implemented at each Complex Site by Corizon Health.</p> <p>A) HSTM 4.1.6 Non-Formulary Drug Requests: A written Action Plan is required from Christy Somner, Regional Director of Nursing, Corizon, to ensure that requests for necessary non-formulary medications at each Complex Site, are received by inmate patients in a timely manner. Providers will need to provide formulary medication, if needed, to provide continuity of care while the NFDR is being processed. This Action Plan requires documented follow-up from Corizon staff that identified medications have been approved or denied and if denied, an appropriate therapy is instituted so that patient will not go without medication during the approval/denial process.</p> <p>a. April 2013 NFDR Stop Date Reports indicates:</p> <p>i. 1583 Non-formulary drugs expiring for 1270 patients</p> <p>B) HSTM 4.1.1 Pharmaceutical Dispensing Procedures: A written Action Plan is required from Christy Somner, Regional Director of Nursing, Corizon, to ensure that all prescriptions are dispensed in a timely manner so as not to contribute to morbidity or mortality and so that the inmate population receive continuity of care. This Action Plan requires documented follow-up from Corizon staff assuring expiring medications at each Complex Site are renewed before expiration date.</p> <p>a. April 2013 Discontinued (Expired) Medication Report indicates:</p> <p>i. 2766 Expired medications expiring for 1721 patients</p>	<b>2</b>
3	Are all medications being prescribed in the therapeutic ranges as determined by the most current editions of the "Drug Facts and Comparisons" or the packet insert?	<b>X</b>			<p>4/26/2013 10:23 AM Entered By: Leslie Boothby</p> <p>4/26/2013 10:23 AM Entered By: Leslie Boothby</p>	<b>1</b>

## April 2013 YUMA COMPLEX

### **Corrective Action Plans for Performance Measure: Prescribing Practices and Pharmacy (Q)**

**2 Are pharmacy policies, procedures forms, (including non-formulary requests) being followed? [NCCHC Standard P-D-01, CC 2.20.2.6]**

**Level 2 Amber User: Leslie Boothby Date: 4/26/2013 10:23:42 AM**

Corrective Plan: We are currently working with Ms. Christy Somner RDON and the PharmaCorr Staff on our medication issues regarding expiring medications, refills, renewals, and non-formulary requests. We are also educating our Nursing Staff regarding all medication policies and procedures. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### April 2013 YUMA COMPLEX

Reporting (AIMS) (Medical Records)(Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are medical AIMS entries being made timely, completely, accurately and no greater than 3 work days from the entry in the medical record? [CC 2.20.2.7, HSTM Chpt. 7, Sec. 8.0]	X			4/29/2013 7:49 PM Entered By: Kathy Campbell  4/26/2013 6:42 PM Entered By: Kathy Campbell Cocopah (Green) Dakota (Green) La Paz (Green) Above yards are in compliance with medical AIMS entries made timely, completely, accurately and no greater than 3 working days, usually same or next working day.	1

### April 2013 YUMA COMPLEX

Grievances (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are grievances being responded to within fifteen (15) working days of receipt per Department Order 802? [P-A-11, DO 802, HSTM Chpt. 1, Sec. 8.0, CC 2.20.2.8]		X		4/26/2013 6:43 PM Entered By: Kathy Campbell Per my discussion with Site Manager Ms. Hale, she currently has ten (10) grievances that are greater than fifteen (15) working days of receipt per DO 802.	2

#### Corrective Action Plans for Performance Measure: Grievances (Q)

**1 Are grievances being responded to within fifteen (15) working days of receipt per Department Order 802? [P-A-11, DO 802, HSTM Chpt. 1, Sec. 8.0, CC 2.20.2.8]**

**Level 2 Amber User: Kathy Campbell Date: 4/26/2013 6:43:27 PM**

Corrective Plan: The importance of grievance turn around times has been stressed to the Administrative Assistant, Nursing Supervisors, and DON to ensure the timely response to all grievances. 5/31/2013 Cyndy Hale FHA

Corrective Actions: See above.

### April 2013 YUMA COMPLEX

No Shows (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are medical, dental and mental health line “no-shows” being reported and documented per policy, Department Order 1101? [DO 1101, HSTM Chpt 5, Sec. 7.1, CC 2.20.2.9]		X		4/27/2013 4:26 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz- (Amber). Inmates not showing for medications and/or appointments. No refusals signed in some of the cases. inmate [REDACTED] - Did not receive his Perpheazine from 4/3/13-4/13/13, but only had two (2) refusals signed in chart. inmate [REDACTED] - Lithium circled on 4/16/13, not clear as to why inmate did not take medication. No refusal found in chart.	1

#### Corrective Action Plans for Performance Measure: No Shows (Q)

**1 Are medical, dental and mental health line “no-shows” being reported and documented per policy, Department Order 1101? [DO 1101, HSTM Chpt 5, Sec. 7.1, CC 2.20.2.9]**  
**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 4:26:28 PM**

Corrective Plan: We have created an "No Show" form along with the Information Report, that was introduced to Medical/Dental/Mental Health Staff at our General Staff Meeting. We will again bring this information to the staff to make sure these forms are being filled out as well as the refusal form. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

## April 2013 YUMA COMPLEX

Mental Health (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are HNRs for Mental Health services triaged within 24 hours of receipt by a qualified Mental Health Professional, to include nursing staff? [CC 2.20.2.10]	X			<p>4/25/2013 1:06 PM Entered By: Steve Bender All HNR's were being triaged within the identified (24) hour time frame.</p> <p>4/25/2013 12:38 PM Entered By: Steve Bender</p> <p>4/25/2013 12:38 PM Entered By: Steve Bender All HNR's were being triaged within the identified (24) hour time frame.</p>	2
2	Are inmates referred to a Psychiatrist or Psychiatric Mid-level Provider seen within seven (7) days of referral? [CC 2.20.2.10]		X		<p>4/25/2013 12:41 PM Entered By: Steve Bender These referrals were not occurring within the identified time frame. During this reporting period the average wait time to be seen by a psychiatric provider was over one month.</p>	2
3	Are MH treatment plans updated every 90 days for each SMI inmate, and at least every 12 months for all other MH-3 and above inmates? [CC 2.20.2.10]		X		<p>4/25/2013 12:45 PM Entered By: Steve Bender SMI treatment plans were not updated within the identified time frame. Of the (50) MH3 charts reviewed only fifty percent had a treatment plan. These results were congruent at each of the units.</p>	1
4	Are inmates with a mental score of MH-3 and above seen by MH staff according to policy? [CC 2.20.2.10]		X		<p>4/25/2013 12:52 PM Entered By: Steve Bender A review of (50) charts found (12) which hadn't been seen in the past (90) days. Cibalo unit only had (1) #inmate Dakota had (2) #inmate and inmate</p>	2
5	Are inmates prescribed psychotropic meds seen by a Psychiatrist or Psychiatric Mid-level Provider at a minimum of every three (3) months (90 days)?[CC 2.20.2.10]		X		<p>4/25/2013 12:52 PM Entered By: Steve Bender See Q4</p>	2
6	Are reentry/discharge plans established no later than 30 days prior release for all inmates with a MH score of MH-3 and above? [CC 2.20.2.10]		X		<p>4/25/2013 12:55 PM Entered By: Steve Bender A review of (50) charts found (13) which had not been seen by a psychiatric provider within the identified time frame.</p>	2

## April 2013 YUMA COMPLEX

### Corrective Action Plans for Performance Measure: Mental Health (Q)

**2 Are inmates referred to a Psychiatrist or Psychiatric Mid-level Provider seen within seven (7) days of referral? [CC 2.20.2.10]**

**Level 2 Amber User: Steve Bender Date: 4/25/2013 12:41:18 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**3 Are MH treatment plans updated every 90 days for each SMI inmate, and at least every 12 months for all other MH-3 and above inmates? [CC 2.20.2.10]**

**Level 1 Amber User: Steve Bender Date: 4/25/2013 12:45:16 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**4 Are inmates with a mental score of MH-3 and above seen by MH staff according to policy? [CC 2.20.2.10]**

**Level 2 Amber User: Steve Bender Date: 4/25/2013 12:52:03 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**5 Are inmates prescribed psychotropic meds seen by a Psychiatrist or Psychiatric Mid-level Provider at a minimum of every three (3) months (90 days)? [CC 2.20.2.10]**

**Level 2 Amber User: Steve Bender Date: 4/25/2013 12:52:35 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**6 Are reentry/discharge plans established no later than 30 days prior release for all inmates with a MH score of MH-3 and above? [CC 2.20.2.10]**

**Level 2 Amber User: Steve Bender Date: 4/25/2013 12:55:12 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**7 \*\*\*Deleted**

**Level 2 Amber User: Steve Bender Date: 4/25/2013 12:57:08 PM**

Corrective Plan: We are in the process of building our Mental Health Staff. When we have our staff, hopefully this will ensure our Mental Health patients are seen in a timely manner and according to standards. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### April 2013 YUMA COMPLEX

<b>Quality and PEER Review (Q)</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Is the contractor physician conducting monthly and quarterly chart reviews? [HSTM Chpt. 1, Sec. 5.0; CC 2.20.2.12]	X			4/27/2013 4:16 PM Entered By: Kathy Campbell	1
2	Is contractor conducting monthly CQI committee meetings and meeting NCCHC standard? [P-A-06, HSTM Chpt. 1, Sec. 5.0; CC 2.20.2.12]	X			4/27/2013 4:19 PM Entered By: Kathy Campbell	1
3	Are CQI committee improvement recommendations acted on timely and progress reported back to committee in the next meeting? [P-A-06, HSTM Chpt. 1, Sec. 5.0; CC 2.20.2.12]	X			4/27/2013 4:19 PM Entered By: Kathy Campbell	1
4	Is the contractor conducting annual PEER reviews for physicians, nurse practitioners, physician assistants, dentists, psychiatrists, psychiatric nurse practitioners and Phd. level psychologists? [P-A-04, P-C-02, HSTM Chpt. 1, Sec. 5.1, CC 2.20.2.12]	X			4/27/2013 4:20 PM Entered By: Kathy Campbell N/A.	1
5	Did the contractor conduct a quarterly on-site review of the site CQI program? [P-A-06, CC 2.20.2.12]	X			4/27/2013 4:20 PM Entered By: Kathy Campbell N/A.	1

**April 2013 YUMA COMPLEX**

<b>Medication Administration</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Is there a formal medication administration program? [NCCHC Standard P-C-05]	X			4/24/2013 11:29 AM Entered By: Patricia Arroyo	1
2	Is the documentation of completed training and testing kept on file for staff who administer or deliver medications? [NCCHC Standard P-C-05; HSTM Chapter 3, Section 4.1]		X		4/29/2013 7:51 PM Entered By: Kathy Campbell Made several request to DON to supply information, never received the requested information.	1
3	Is there a tracking system for KOP medications to determine if medications have been received by the inmate? [NCCHC Standard P-D-01]		X		4/24/2013 11:30 AM Entered By: Patricia Arroyo The staff is attempting to develop & implement a process to verify KOP medications.	1
4	Are the Medication Administration Records (MAR) being completed in accordance with standard nursing practices? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]		X		4/24/2013 11:33 AM Entered By: Patricia Arroyo C bloa Unit: inmate [redacted] Benadryl 50mg Nurse did not document 4/2 am, pm dose, 4/18 pm dose, Diagnosis is not on the MAR, Four Nurses signatures but not printed. inmate [redacted] Celexa no indication of mg dose?, Levothyroid, Lisinopril, Lasix Metformin no sig for route, frequency, Allergies not documented, The year is not documented. One Nurse signature x 1, name not printed. inmate [redacted], the year is not documented, Allergies not documented inmate [redacted]: diagnosis not documented, stop date (10 days), There is no Nurses Name printed/ signature page. inmate [redacted]: Diagnosis not documented, Prescriber not documented, Start/Stop date not documented, Month/year not documented. Nurses name printed/signature not documented. inmate [redacted]: Diagnosis not documented, Month/year not documented, Nurses signature/printed not documented. inmate [redacted] No DOC number documented, Prescriber, Diagnosis, DOB, Month, year, Nurses signature/printed not documented on MAR inmate [redacted]: Diagnosis, Allergies, Start/stop date Prescriber number no name, Month/year, Nurses name printed/signature, all not documented. inmate [redacted]: Benadryl 25 mg There is no documentation for the following dates 4/1, 2,3,4,5,6,8,9,18,21 that inmate was administered medication. Prescribers name, diagnosis, allergies, Nurses signature x 1 not printed. All not documented. inmate [redacted]: Diagnosis, stop date (6 mo), 4/18, pm dose not documented. Three nurses signature name is not printed.  4/24/2013 11:32 AM Entered By: Patricia Arroyo Cheyenne Unit:	1

April 2013 YUMA COMPLEX

				<p>inmate [redacted] diagnosis/provider name, nurses name signature/printed not on the MAR.</p> <p>inmate [redacted] : diagnosis;Allergies;provider name;start/stop date,;month/year;nurses signature/printed not on the MAR.</p> <p>inmate [redacted] : Allergies;stop date; administration of Risperdal; cogentin for the following days 4/1,2,3,4,5, Three nurses signature name is not printed x 3 nurses.</p> <p>inmate [redacted] : Prescribers name;diagnosis;allergies;month/year;nurses signature/printed</p> <p>inmate [redacted] : Metoprolol 25 mg; prescriber name;start/stop date;diagnosis; three nurses name is not printed.</p> <p>inmate [redacted] : prescriber name;start/stop date/year/no nurses signature/name print on the MAR.</p> <p>inmate [redacted] : Norvasc; prescriber name not on order/diagnosis, nurses signature/printed.</p> <p>inmate [redacted] : Vistral;Gabapentin; no stop date;administration of medication not documented for the following dates 4/1, am dose, 4/2, 3 am &amp; pm dose.</p> <p>inmate [redacted] : allergies not documented, stop date not documented. Nurses name is not printed.</p> <p>inmate [redacted] : prescriber/start/stop date of medication;diagnosis;allergies;month/year not documented.</p>	
				<p>4/27/2013 4:53 PM Entered By: Kathy Campbell Cocopah, Dakota and La Paz with multiple MAR issues that does not qualify for being completed in accordance with standard nursing practices. Below are a small sample of non-compliant MARs.</p> <p>inmate [redacted] - Nortriptylin 4/14/13 PM dose blank.</p> <p>inmate [redacted] - Benzotropine and Risperdone PM blank on 4/3/13 and 4/4/13.</p> <p>inmate [redacted] - Navane and Tegretol are blank on 4/1/13 and 4/2/13.</p> <p>inmate [redacted] - April MAR without Dx and allergies.</p> <p>inmate [redacted] - PM Gabapentin on 4/15/13 signed off at 0930 on 4/15/13.</p> <p>inmate [redacted] - Amitriptyline PM blank on 4/3, 4/4 and 4/9/13.</p> <p>inmate [redacted] - Risperidone 4/9, 4/13 adn 4/14 PM blank.</p> <p>inmate [redacted] - Calcitriol marked off for 4/18/13 (monthly dose) blank.</p> <p>inmate [redacted] - Risperidone PM blank on 4/1-4/5, 4/8, 4/10, 4/11, 4/15, 4/18, 4/21.</p> <p>inmate [redacted] - Warfarin circled on 4/13, blank on 4/15, circled on 4/16, blank 4/19, 4/23.</p> <p>inmate [redacted] - Buspirone 1600 dose blank on 4/1, 4/13,4/17 and circled on 4/14 and 4/16/13 without a note on the back.</p>	
5	Are medication errors forwarded to the FHA to review corrective action plan?	X		4/27/2013 4:53 PM Entered By: Kathy Campbell	2

**April 2013 YUMA COMPLEX**

6	Are there any unreasonable delays in inmate receiving prescribed medications?		X		<p>4/27/2013 5:00 PM Entered By: Kathy Campbell                  Many delays in inmates receiving prescribed medications.                  Cocopah-<b>[redacted]</b> - Delay in receiving his chronic care medications.                  Dakota and La Paz-<b>[redacted]</b> - Pamelor with No med for unknown amount of time. Per MAR 4/7-4/18/13.  <b>[redacted]</b> - Lamictal was ordered on 4/10/13, per MAR inmate did not receive until 4/20/13.  <b>[redacted]</b> - Methotrexate was to be given weekly and circled on 4/24/13. Does not appear he received his medication at all in April (per MAR).  <b>[redacted]</b> - Fluconazole ordered 3/4/13, but per April MAR, doesn't seem to appear he has his medication as of 4/26/13.  <b>[redacted]</b> - Enbrel ordered weekly. Last signed off on April MAR on 4/5/13, was due 4/12, 4/19 and 4/26, but no initials, "expired" written across dates from 4/18-4/25/13.</p>	2
7	Are inmates being required to show ID prior to being administered their medications?	X			<p>4/24/2013 11:34 AM Entered By: Patricia Arroyo</p>	2
8	Are chronic condition medication expiration dates being reviewed prior to expiration to ensure continuity of care? [NCCHC Standard P-D-01]		X		<p>4/27/2013 5:01 PM Entered By: Kathy Campbell                  Many delays in inmates receiving prescribed medications.                  Cocopah-<b>[redacted]</b> - Delay in receiving his chronic care medications.</p>	2
9	Are non-formulary requests being reviewed for approval or disapproval within 24 to 48 hours?		X		<p>4/27/2013 5:01 PM Entered By: Kathy Campbell                  Many delays in inmates receiving prescribed medications.                  Cocopah-<b>[redacted]</b> - Delay in receiving his chronic care medications.                  Dakota and La Paz-<b>[redacted]</b> - Pamelor with No med for unknown amount of time. Per MAR 4/7-4/18/13.  <b>[redacted]</b> - Lamictal was ordered on 4/10/13, per MAR inmate did not receive until 4/20/13.  <b>[redacted]</b> - Methotrexate was to be given weekly and circled on 4/24/13. Does not appear he received his medication at all in April (per MAR).  <b>[redacted]</b> - Fluconazole ordered 3/4/13, but per April MAR, doesn't seem to appear he has his medication as of 4/26/13.  <b>[redacted]</b> - Enbrel ordered weekly. Last signed off on April MAR on 4/5/13, was due 4/12, 4/19 and 4/26, but no initials, "expired" written across dates from 4/18-4/25/13.</p>	2
10	Are providers being notified of non-formulary		X		<p>4/27/2013 5:04 PM Entered By: Kathy</p>	2

**April 2013 YUMA COMPLEX**

	decisions within 24 to 48 hours?			Campbell inmate - Non formulary gabapentin was requested on 4/11/13, but information did not return to Provider until 4/14/13.	
11	Are medication error reports being completed and medication errors documented?	X		4/29/2013 7:52 PM Entered By: Kathy Campbell	2

**Corrective Action Plans for Performance Measure: Medication Administration**

**2 Is the documentation of completed training and testing kept on file for staff who administer or deliver medications? [NCCHC Standard P-C-05; HSTM Chapter 3, Section 4.1]**

**Level 1 Amber User: Kathy Campbell Date: 4/29/2013 7:51:36 PM**

Corrective Plan: Working with the DON to ensure the proper documentation for any and all Medical Training is done appropriately. This information will then be passed on to the auditors upon request. 5/31/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**3 Is there a tracking system for KOP medications to determine if medications have been received by the inmate? [NCCHC Standard P-D-01]**

**Level 1 Amber User: Patricia Arroyo Date: 4/24/2013 11:30:48 AM**

Corrective Plan: Our Inventory Control Staff, PharmaCorr Staff, and Nursing Supervisors are developing and implementing a process to verify the KOP medications. 6/2/2013 Cyndy Hale FHA

Corrective Actions: See above.

**4 Are the Medication Administration Records (MAR) being completed in accordance with standard nursing practices? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]**

**Level 1 Amber User: Patricia Arroyo Date: 4/24/2013 11:33:21 AM**

Corrective Plan: We are working with the Nursing Staff to ensure that documentation is being done in accordance with the standard nursing practices. At this time, our whole staff have acquired printed name stamps. We will reinforce the use of the printed stamp and MAR documentation at the next Nurses' Staff Meeting. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**4 Are the Medication Administration Records (MAR) being completed in accordance with standard nursing practices? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]**

**Level 1 Amber User: Patricia Arroyo Date: 4/24/2013 11:33:21 AM**

Corrective Plan: We are working with the Nursing Staff to ensure that documentation is being done in accordance with the standard nursing practices. At this time, our whole staff have acquired printed name stamps. We will reinforce the use of the printed stamp and MAR documentation at the next Nurses' Staff Meeting. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**4 Are the Medication Administration Records (MAR) being completed in accordance with standard nursing practices? [HSTM Chapter 4, Section 1.1, Chapter 5, Section 6.4]**

**Level 1 Amber User: Kathy Campbell Date: 4/27/2013 4:53:11 PM**

Corrective Plan: We are working with the Nursing Staff to ensure that documentation is being done in accordance with the standard nursing practices. At this time, our whole staff have acquired printed name stamps. We will reinforce the use of the printed stamp and MAR documentation at the next Nurses' Staff Meeting. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**6 Are there any unreasonable delays in inmate receiving prescribed medications?**

**Level 2 Amber User: Kathy Campbell Date: 4/27/2013 5:00:28 PM**

## April 2013 YUMA COMPLEX

Corrective Plan: We are currently working with our Inventory Control Staff, PharmaCorr, and Nursing Supervisors to find a way to decrease delays in our patients receiving their medications. Again, will re-inforce with Nursing Staff the correct documentation on the MARs and the use of the printed name stamp at the next Nurses' Staff Meeting. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### **8 Are chronic condition medication expiration dates being reviewed prior to expiration to ensure continuity of care?**

**[NCCHC Standard P-D-01]**

**Level 2 Amber User: Kathy Campbell Date: 4/27/2013 5:01:09 PM**

Corrective Plan: Our Inventory Control Staff, Provider, and Nursing Staff are in the process of reviewing the Expiration Log in a timely manner to ensure our patients' Chronic Care medications are being reviewed prior to expiration. We are in the process of building our Provider Staff to also ensure our Continuity of Care is on track with our patients. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### **9 Are non-formulary requests being reviewed for approval or disapproval within 24 to 48 hours?**

**Level 2 Amber User: Kathy Campbell Date: 4/27/2013 5:01:28 PM**

Corrective Plan: Our Regional Medical Director and PharmaCorr Staff is attempting to approve and/or disapprove the non-formulary requests within the time frame. We just received an update last week regarding the non-formulary requests that were out of sequence. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

### **10 Are providers being notified of non-formulary decisions within 24 to 48 hours?**

**Level 2 Amber User: Kathy Campbell Date: 4/27/2013 5:04:06 PM**

Corrective Plan: We are in the process of building our Provider Staff. When we have more than one provider, this will hopefully take place in a timely manner. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**April 2013 YUMA COMPLEX**

Staffing																																																															
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level																																																									
1	Is there an approved staffing pattern available to the Site Manager (FHA)? [NCCHC Standard P-C-07; HSTM Chapter 3, Section 2.0]	X			4/26/2013 6:44 PM Entered By: Kathy Campbell	1																																																									
2	Are the adequacy and effectiveness of the staffing assessed by the facility's sufficient to meet the needs of the inmate population? [NCCHC Standard P-C-07; HSMT Chapter 3, Section 2.0]		X		4/26/2013 6:45 PM Entered By: Kathy Campbell The staffing is not adequate/effective to meeting the facility's needs of inmate population as evidenced by sick call not being conducted daily on yards, La Paz with 3-4 months backlog of chronic care visits, etc.	3																																																									
3	Are all positions filled per contractor staffing pattern?		X		4/26/2013 6:52 PM Entered By: Kathy Campbell All positions are not filled per staffing pattern. As of 4/9/13, the following has occurred. <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td align="right">budgeted for</td> <td align="right">Open</td> </tr> <tr> <td>Administrative Assistant-</td> <td align="right">2.0</td> <td></td> </tr> <tr> <td>1.0</td> <td></td> <td></td> </tr> <tr> <td>Assistant HSA</td> <td align="right">1.0</td> <td></td> </tr> <tr> <td>1.0</td> <td></td> <td></td> </tr> <tr> <td>Dental Assistant</td> <td align="right">6.0</td> <td></td> </tr> <tr> <td>2.0</td> <td></td> <td></td> </tr> <tr> <td>Dental Director</td> <td align="right">1.0</td> <td align="right">1.0</td> </tr> <tr> <td>Dental Hygienist</td> <td align="right">0.20</td> <td></td> </tr> <tr> <td>0.20</td> <td></td> <td></td> </tr> <tr> <td>Dentist</td> <td align="right">3.0</td> <td align="right">2.0</td> </tr> <tr> <td>LPN</td> <td align="right">10.50</td> <td align="right">2.5</td> </tr> <tr> <td>Nurse Practitioner</td> <td align="right">3.0</td> <td></td> </tr> <tr> <td>3.0</td> <td></td> <td></td> </tr> <tr> <td>Physician</td> <td align="right">1.0</td> <td align="right">1.0</td> </tr> <tr> <td>Psych Associate</td> <td align="right">3.0</td> <td></td> </tr> <tr> <td>3.0</td> <td></td> <td></td> </tr> <tr> <td>RN Supervisor</td> <td align="right">2.0</td> <td></td> </tr> <tr> <td>2.0</td> <td></td> <td></td> </tr> </table> The facility is actively recruiting and continue to interview for all positions that are open. Yuma remains with only one full-time Provider.		budgeted for	Open	Administrative Assistant-	2.0		1.0			Assistant HSA	1.0		1.0			Dental Assistant	6.0		2.0			Dental Director	1.0	1.0	Dental Hygienist	0.20		0.20			Dentist	3.0	2.0	LPN	10.50	2.5	Nurse Practitioner	3.0		3.0			Physician	1.0	1.0	Psych Associate	3.0		3.0			RN Supervisor	2.0		2.0			2
	budgeted for	Open																																																													
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RN Supervisor	2.0																																																														
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4	Is the Site Manager (FHA) kept informed of recruiting efforts being taken to fill vacant positions by the corporate office?	X			4/26/2013 6:52 PM Entered By: Kathy Campbell	2																																																									

**Corrective Action Plans for Performance Measure: Staffing**

**2 Are the adequacy and effectiveness of the staffing assessed by the facility's sufficient to meet the needs of the inmate population? [NCCHC Standard P-C-07; HSMT Chapter 3, Section 2.0]**  
**Level 3 Amber User: Kathy Campbell Date: 4/26/2013 6:45:44 PM**

Corrective Plan: We are attempting to build up our core Nursing Staff. As we build, we will re-inforce documentation of NETs/MARs/etc. and ensure that we have the most updated manuals/policies/protocols for reference materials. We want to make sure that our patients are seen according to the standards and in a timely fashion. 6/2/2013  
 Cyndy Hale, FHA

Corrective Actions: See above.

### April 2013 YUMA COMPLEX

**3 Are all positions filled per contractor staffing pattern?**

**Level 2 Amber User: Kathy Campbell Date: 4/26/2013 6:52:20 PM**

Corrective Plan: At this time, we are actively recruiting for these positions. We have filled the Assistant FHA/Dental Assistant/Dental Hygienist/two Psyche Associate/two RN Supervisor positions, they will be starting at different times in June. We are also screening Agency/Locum Providers at this time. 6/2/2013 Cyndy Hale, FHA

Corrective Actions: See above.

**April 2013 YUMA COMPLEX**

<b>Infirmiry Care</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Does policy or post order define the specific scope of medical, psychiatric, and nursing care provided in the infirmiry setting?	<b>X</b>			4/5/2013 1:54 PM Entered By: Patricia Arroyo  4/4/2013 1:31 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex  4/4/2013 7:55 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	<b>1</b>
2	Are patients always within sight or hearing of a qualified health care professional (do inmates have a method of calling the nurse?)	<b>X</b>			4/4/2013 1:32 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex  4/4/2013 7:55 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	<b>1</b>
3	Is the number of appropriate and sufficient qualified health professionals in the infirmiry determined by the number of patients, severity of illnesses and level of care required?	<b>X</b>			4/4/2013 1:33 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex  4/4/2013 7:55 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	<b>1</b>
4	Is a supervising registered nurse in the IPC 24 hours a day?	<b>X</b>			4/4/2013 1:34 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex  4/4/2013 7:55 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	<b>1</b>
5	Is the manual of nursing care procedures consistent with the state's nurse practice act and licensing requirements?	<b>X</b>			4/5/2013 1:54 PM Entered By: Patricia Arroyo  4/4/2013 1:34 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex  4/4/2013 7:55 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	<b>1</b>
6	Does admission to or discharge from infirmiry care occur only on the order of physician or other provider where permitted by virtue of	<b>X</b>			4/4/2013 1:34 PM Entered By: Patricia Arroyo There is no infirmiry at this Complex	<b>1</b>

## April 2013 YUMA COMPLEX

	credentials and scope of practice?				4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	
7	Is the frequency of physician and nursing rounds in the infirmary specified based on categories of care provided?	X			4/4/2013 1:35 PM Entered By: Patricia Arroyo There is no infirmary at this Complex.  4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
8	Is a complete inmate health record kept and include: -Admitted order (admitting diagnosis, medications, diet, activity restrictions, required diagnostic tests, frequency of monitoring and follow-up -Complete document of care and treatment given -Medication administration record -Discharge plan and discharge notes	X			4/4/2013 1:35 PM Entered By: Patricia Arroyo There is no infirmary at this Complex.  4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
9	If inpatient record is different than outpatient record, is a copy of the discharge summary from the infirmary care placed in the patient's outpatient chart?	X			4/4/2013 1:36 PM Entered By: Patricia Arroyo There is no infirmary at this Complex  4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
10	If an observation patient is placed by a qualified health care professional for longer than 24 hours, is this order being done only by a physician?	X			4/4/2013 1:36 PM Entered By: Patricia Arroyo There is no infirmary at this Complex.  4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
11	Are vital signs done daily when required?	X			4/4/2013 1:45 PM Entered By: Patricia Arroyo There is no infirmary at this Complex  4/4/2013 7:56 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
12	Are there nursing care plans that are reviewed weekly and are signed and dated?	X			4/4/2013 1:46 PM Entered By: Patricia Arroyo There is no infirmary at this Complex	1

### April 2013 YUMA COMPLEX

					4/4/2013 7:57 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	
13	Are medications and supplies checked regularly, and who is assigned to do it? [NCCHC Standard P-D-03]	X			4/4/2013 1:46 PM Entered By: Patricia Arroyo There is no infirmary at this Complex	1
					4/4/2013 7:57 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	