

April 2013 SAFFORD 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			4/2/2013 3:18 PM Entered By: Karyn Christie NA not a intake Complex.	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			4/2/2013 3:19 PM Entered By: Karyn Christie NA not an intake complex.	2

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Sick Call (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
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			4/4/2013 10:07 AM Entered By: Karyn Christie Both units see sick patients on a daily basis.	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			4/11/2013 10:39 AM Entered By: Karyn Christie 4/11/2013 10:39 AM Entered By: Karyn Christie Both units are in compliance with this.	1
3	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]	X			4/11/2013 10:40 AM Entered By: Karyn Christie Both units compliant of twenty charts reviewed non were noncompliant.	1
4	Is the SOAPE format being utilized in the inmate medical record for encounters? [DO 1104, HSTM Chapter 5, Section 1.3]	X			4/11/2013 10:43 AM Entered By: Karyn Christie There were two charts at each unit tht did not have the "E". They were provider notes. Nurses at both units stated they will be more vigilents and return charts without the E to providers for review.	1
5	Are referrals to providers from sick call being seen within seven (7) days? [P-E-07]	X			4/4/2013 10:10 AM Entered By: Karyn Christie Providers see inmates with referrals usually within one or two days. During the week they are usually seen the day of the referral or the next day.	1
6	Are nursing protocols in place and utilized by the nurses for sick call?	X			4/11/2013 10:44 AM Entered By: Karyn Christie Both units could do a bit better at this but improvement has been noted.	1

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Medical Specialty Consultations (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are urgent consultations being scheduled to be seen within thirty (30) days of the consultation being initiated? [CC 2.20.2.3]	X			4/14/2013 5:45 PM Entered By: Kathy Campbell	2
2	Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]		X		4/27/2013 2:35 PM Entered By: Kathy Campbell See below. 4/14/2013 5:47 PM Entered By: Kathy Campbell One chart at Ft. Grant found with consult report not being reviewed by the Provider within seven (7) days of receipt. inmate - Information received 3/5/13 (faxed), but not reviewed until 3/15/13. *Side note- inmate - Outside consult dated 2/27/13 not reviewed as of 4/11/13. Appears to have been received via email on 4/8/13.	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			4/14/2013 5:47 PM Entered By: Kathy Campbell	3
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			4/14/2013 5:48 PM Entered By: Kathy Campbell	2
5	Do all inpatient admissions have documented utilization review of admission and evidence of discharge planning? [CC 2.20.2.3]	X			4/14/2013 5:48 PM Entered By: Kathy Campbell	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: 4/27/2013 2:35:43 PM

Corrective Plan: At some of the problems have been getting back reports for the consults. That being said starting 5/31/2013 on Fridays the UM nurses will review all consults that went out during the week will review the chart to see if reports are back and be responsible for having the provider sign. The DON will follow up with the UM nurses to see that this has been done every Friday.

Ann Rochelle Mullen, RN FHA
 Safford AZ. Complex

May 31,2013

Corrective Actions: Approved.

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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		4/27/2013 2:36 PM Entered By: Kathy Campbell See below. 4/14/2013 5:57 PM Entered By: Kathy Campbell Inmate [redacted] at Ft. Grant arrived 1/19/12, but cc for Asthma, HTN and HEP C wasn't completed until 3/6/13 (> 30 days).	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			4/14/2013 5:57 PM Entered By: Kathy Campbell	2
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		4/27/2013 2:36 PM Entered By: Kathy Campbell See below. 4/14/2013 5:58 PM Entered By: Kathy Campbell Inmate [redacted] at Tonto had no education documented on his CC (HTN) form of 3/13/13.	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		4/14/2013 6:06 PM Entered By: Kathy Campbell Multiple charts at Ft. Grant and Tonto noted with incomplete cc forms completed (guidelines not being completed). These include: Tonto- inmate [redacted] - "For all diseases, since last visit" area was blank. CC is Asthma. Under the box of "# of attacks" was blank. PE: Incomplete. HEENT/Neck; GU/Rectal; Opt blank. inmate [redacted] - CC Asthma. "# of attacks" was blank. PE incomplete. inmate [redacted] - CC HTN 3/13/13- Special Needs Box blank. Ft. Grant- inmate [redacted] - 4/4/13 cc form incomplete. "For all diseases, since last visit ..." blank. Current meds- blank. # of days for next visit- other, no date/month/etc. blank. inmate [redacted] - Subjective- blank. Special needs box blank. No follow up ordered (3/6/13 cc form for Asthma, Hep C and HTN). inmate [redacted] - CC Asthma 3/29/13. CC form incomplete. # of attacks - blank. "For all diseases, ..." - blank. Degree of Control/Clinical status for Asthma blank. Special Needs box blank.	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			4/14/2013 6:06 PM Entered By: Kathy Campbell N/A.	2

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

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]

Level 1 Amber User: Kathy Campbell Date: 4/27/2013 2:36:15 PM

Corrective Plan: inmate has 5 vol. of medical records. He was house at Graham Unit in Safford complex and moved to Ft. Grant unit in Safford complex on 1/19/2013. He had a CC appt. on 9/13/2013 for Asthma, HTN, Cardiac, and Hep C. Provider order was to see again in 6 months. He was seen again for his CC on 3/6/2013. He has been seen again for his CC hep C and B on 4/19/2013 and then again 5/10/2013. His chronic care visits have been within the guidelines.

Corrective Actions: Approved.

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: Kathy Campbell Date: 4/27/2013 2:36:32 PM

Corrective Plan: Corizon has implemented new education logs that the inmates will be signing off. Have educated the providers on the use of these logs. Will continue to monitor to assure that the providers are providing education on all inmate visits.

Ann Rochelle Mullen, RN FHA
Safford Complex
5/21/2013

Corrective Actions: Approved.

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]

Level 2 Amber User: Kathy Campbell Date: 4/14/2013 6:06:04 PM

Corrective Plan: Have discussed with providers that all areas of the CC forms must be filled out to be complete. Will all present in next CQI meeting for plans of correcting.

Ann Rochelle Mullen, RN FHA
Safford Complex
4/18/2013

Corrective Actions: Approved.

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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			4/4/2013 10:06 AM Entered By: Karyn Christie Both units are in compliance with this.	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			4/11/2013 10:24 AM Entered By: Karyn Christie Both units doing a good job of this.	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		<p>4/17/2013 6:29 AM Entered By: Karyn Christie Ft. Grant's March MARs looked excellent. Both Ft. Grant and Tonto's April MARs had areas crossed out that should have been rewritten in the box below. The FHA and DON addressed it as soon as they were aware it had been done.</p> <p>4/17/2013 2:29 PM Entered By: Kathy Campbell Multiple MARs noted with previous start/stop dates, directions and providers marked off and new information written in above, next to or below rather than rewriting a new order. This was noted at both Ft. Grant and Tonto. These include: the following on April MARs: Tonto- inmate ██████████ - Allopurinol, Lisinopril and Albuterol orders. inmate ██████████ - Lisinopril inmate ██████████ inmate ██████████ inmate ██████████ inmate ██████████ inmate ██████████ inmate ██████████ inmate ██████████ Ft. Grant- inmate ██████████ - Ibuprofen inmate ██████████ inmate ██████████</p> <p>Also some MARs noted without Provider, start/stop date and/or route at Ft. Grant- inmate ██████████ - Prilosec inmate ██████████ - Pamelor inmate ██████████ - Without Provider, start or stop date on INH. inmate ██████████ - Pamelor without route. inmate ██████████ - Naproxen without stop date.</p>	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			4/11/2013 10:29 AM Entered By: Karyn Christie Both health units are doing a good job with this.	1
5	Are arrival logs maintained and kept current with name of inmate, ADC #, date of arrival, # of volumes?	X			4/2/2013 3:21 PM Entered By: Karyn Christie Yes at both Ft Grant and Tonto Health Units.	1

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		X				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			4/2/2013 3:22 PM Entered By: Karyn Christie Yes at both Health units (Tonto and Ft. Grant)	1
7	Are previous (old) volumes filed in a separate location (not with active files) and easily accessible to obtain as needed?	X			4/2/2013 3:23 PM Entered By: Karyn Christie Yes at both Tonto and Ft. Grant health units.	1
8	Are medical records for released inmates pulled from the active file area?	X			4/4/2013 10:08 AM Entered By: Karyn Christie Both Health units are doing a good job with this.	1
9	Are requested archived medical records merged with newly established medical records upon an inmates return to ADC?	X			4/11/2013 10:31 AM Entered By: Karyn Christie MrIs at bth units are tracking this and if they have not recieved a requested record within thirty days, they resubmit the request.	1
10	Is a Release of Information log maintained that reflects the Medical Records Requests for 3rd parties (attorney and family requests only)?	X			4/11/2013 10:31 AM Entered By: Karyn Christie Both units have a tracking system in place.	1

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

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: 4/17/2013 2:29:56 PM

Corrective Plan: Have educated nursing on yellowing out orders on the mars if there are any changes and rewrite the order in next open space on the mars. Continue mar education with all staff and continue to have assigned staff reviewing mars for errors.

Ann Rochelle Mullen, RN FHA
Safford Complex
4/18/2013

Corrective Actions: See above.

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Prescribing Practices and Pharmacy (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are recommendations made by the Pharmacy and Therapeutics Committee appropriately enacted? [CC 2.20.2.6]	X			4/26/2013 10:16 AM Entered By: Leslie Boothby	2
2	Are pharmacy polices, procedures forms, (including non-formulary requests) being followed? [NCCHC Standard P-D-01, CC 2.20.2.6]		X		<p>4/26/2013 10:17 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>	2
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?	X			4/26/2013 10:17 AM Entered By: Leslie Boothby	1

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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 10:17:13 AM

Corrective Plan: Safford Complex, all units, keep a log of non-formulary requests. This is checked on a daily basis for approvals they are resent to Dr. Williams for approval if there has been no response and follow-up daily until response is received. We pull the expiring medication report from the Pharmacorr website, which is not always up to date, in the middle of the month for the following month. If there are medications that need to be renewed, cc medications, the inmate is scheduled with the provider before the medication runs out. These are the processes that we have initiated at Safford Complex to assure continuity of care.

Ann Rochelle Mullen, RN FHA
Safford Complex
May 31, 2013

Corrective Actions: See above.

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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			4/11/2013 10:37 AM Entered By: Karyn Christie Both Health Units are doing well with this	1

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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			4/2/2013 3:17 PM Entered By: Karyn Christie NA there have been no grievances from any of the yards since Corizon took over.	2

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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			<p>4/11/2013 10:36 AM Entered By: Karyn Christie Both units pursue no shows and reason why. Inmates are rescheduled or put on report depending on whether they signed "Pass"</p> <p>4/11/2013 10:32 AM Entered By: Karyn Christie</p> <p>4/11/2013 10:32 AM Entered By: Karyn Christie</p>	1

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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			4/27/2013 2:34 PM Entered By: Kathy Campbell	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			4/27/2013 2:34 PM Entered By: Kathy Campbell	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			4/27/2013 2:34 PM Entered By: Kathy Campbell	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			4/27/2013 2:34 PM Entered By: Kathy Campbell	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			4/27/2013 2:34 PM Entered By: Kathy Campbell	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			4/27/2013 2:34 PM Entered By: Kathy Campbell	2

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Quality and PEER Review (Q)						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Is the contractor physician conducting monthly and quarterly chart reviews? [HSTM Chpt. 1, Sec. 5.0; CC 2.20.2.12]	X			4/15/2013 9:38 AM Entered By: Karyn Christie Dr. Coons is doing reviews at both units on a monthly basis.	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			4/4/2013 10:03 AM Entered By: Karyn Christie Yes first Corizon CQI meeting was 04/03/2013	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			4/4/2013 10:04 AM Entered By: Karyn Christie April 4th was the first Corizon CQI. Will do follow up in May.	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			4/3/2013 9:51 AM Entered By: Karyn Christie NA contractor has been in place for only one month	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			4/4/2013 10:05 AM Entered By: Karyn Christie NA have not been in place one quarter yet.	1

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Medication Administration						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Is there a formal medication administration program? [NCCHC Standard P-C-05]	X			4/14/2013 6:07 PM Entered By: Kathy Campbell	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			4/17/2013 3:34 PM Entered By: Kathy Campbell	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			4/14/2013 6:07 PM Entered By: Kathy Campbell	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		<p>4/14/2013 6:16 PM Entered By: Kathy Campbell</p> <p>Multiple MARs noted with previous start/stop dates, directions and providers marked off and new information written in above, next to or below rather than rewriting a new order. This was noted at both Ft. Grant and Tonto. These include the following on April MARs:</p> <p>Tonto-</p> <p>inmate ██████████ - Allopurinol, Lisinopril and Albuterol orders.</p> <p>inmate ██████████ -Lisinopril</p> <p>inmate ██████████</p> <p>inmate ██████████</p> <p>inmate ██████████</p> <p>inmate ██████████</p> <p>inmate ██████████</p> <p>Ft. Grant-</p> <p>inmate ██████████ -Ibuprofen</p> <p>inmate ██████████</p> <p>inmate ██████████</p> <p>Also some MARs noted without Provider, start/stop date and/or route at Ft. Grant-</p> <p>inmate ██████████ -Prilosec</p> <p>inmate ██████████ -Pamelor</p> <p>inmate ██████████ -Without Provider, start or stop date on INH.</p> <p>inmate ██████████ - Pamelor without route.</p> <p>inmate ██████████ -Naproxen without stop date.</p>	1
5	Are medication errors forwarded to the FHA to review corrective action plan?	X			4/14/2013 6:17 PM Entered By: Kathy Campbell	2
6	Are there any unreasonable delays in inmate receiving prescribed medications?		X		<p>4/19/2013 3:42 PM Entered By: Kathy Campbell</p> <p>See below.</p> <p>4/14/2013 6:18 PM Entered By: Kathy Campbell</p> <p>One Inmate found being out of his Lisinopril for 3 days, per 4/10/13 note. BP was 135/100. Medications have been ordered and now receiving stock supply until his arrives. BPs are also being monitored and</p>	2

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		X			documented.	
7	Are inmates being required to show ID prior to being administered their medications?	X			4/14/2013 6:19 PM Entered By: Kathy Campbell	2
8	Are chronic condition medication expiration dates being reviewed prior to expiration to ensure continuity of care? [NCCHC Standard P-D-01]	X			4/14/2013 6:19 PM Entered By: Kathy Campbell	2
9	Are non-formulary requests being reviewed for approval or disapproval within 24 to 48 hours?	X			4/14/2013 6:19 PM Entered By: Kathy Campbell	2
10	Are providers being notified of non-formulary decisions within 24 to 48 hours?	X			4/14/2013 6:19 PM Entered By: Kathy Campbell	2
11	Are medication error reports being completed and medication errors documented?	X			4/14/2013 6:19 PM Entered By: Kathy Campbell	2

Corrective Action Plans for Performance Measure: Medication Administration

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: 4/14/2013 6:16:01 PM

Corrective Plan: Have educated nursing on yellowing out orders on the mars if there are any changes and rewrite the order in next open space on the mars. Continue mar education with all staff and continue to have assigned staff reviewing mars for errors.

Ann Rochelle Mullen, RN FHA
Safford Complex
4/18/2013

Corrective Actions: Approved.

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

Level 2 Amber User: Kathy Campbell Date: 4/19/2013 3:42:07 PM

Corrective Plan: Continue to review expiring medication reports from Pharmacor and review scripts that were faxed to make sure that faxes go through to Pharmacor for filling. Nursing is to have inmates come up if there medications did not arrive as planned and evaluate. If the inmate is out of his CC medication, it is to be pulled from RDSA stock and issued. If not available in the RDSA stock it is to be obtained from the back-up pharmacy. This will be reinforced will all staff especially nursing.

Ann Rochelle Mullen, RN FHA
Safford, AZ.
4/18/2013

Corrective Actions: Approved.

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

Level 2 Amber User: Kathy Campbell Date: 4/19/2013 3:42:07 PM

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Corrective Plan: Staff has been pulling expiring medication reports mid month for the following month. If a CC medication is expiring the inmate is schedule to see the doctor to get orders before it expires. If an inmates medications have expired and it has been missed the medication is pulled for the RDSA if available and issued that day to the inmate. If it is a medication that we do not have in stock we will obtain it from the back up pharmacy. We will continue reviewing batch reports from Pharmacorr and pulling our own reports from Pharmacorr website.

Ann Rochelle Mullen, RN FHA
Safford AZ. Complex

May 31, 2013

Corrective Actions: Approved.

April 2013 SAFFORD 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			4/17/2013 6:30 AM Entered By: Karyn Christie Yes	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			4/17/2013 6:35 AM Entered By: Karyn Christie This continues to be an area of potential concern. Corizon has approved fewer nurses than previously were employed. Ft. Grant and the extra requirements of the tomatoe crew, may prove to be too much for one evening nurse in the long term.	3
3	Are all positions filled per contractor staffing pattern?	X			4/17/2013 6:40 AM Entered By: Karyn Christie No there is an opening for a .25 Medical Director. Also they are short a Dentist a couple of shifts per month.	2
4	Is the Site Manager (FHA) kept informed of recruiting efforts being taken to fill vacant positions by the corporate office?	X			4/17/2013 6:40 AM Entered By: Karyn Christie Yes	2

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Infirmiry Care						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Does policy or post order define the specific scope of medical, psychiatric, and nursing care provided in the infirmiry setting?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
2	Are patients always within sight or hearing of a qualified health care professional (do inmates have a method of calling the nurse?)	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
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?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
4	Is a supervising registered nurse in the IPC 24 hours a day?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
5	Is the manual of nursing care procedures consistent with the state's nurse practice act and licensing requirements?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
6	Does admission to or discharge from infirmiry care occur only on the order of physician or other provider where permitted by virtue of credentials and scope of practice?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
7	Is the frequency of physician and nursing rounds in the infirmiry specified based on categories of care provided?	X			4/4/2013 8:03 PM Entered By: Kathy Campbell N/A. No infirmiry 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 8:04 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
9	If inpatient record is different than outpatient record, is a copy of the discharge summary from the infirmiry care placed in the patient's outpatient chart?	X			4/4/2013 8:04 PM Entered By: Kathy Campbell N/A. No infirmiry 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 8:04 PM Entered By: Kathy Campbell N/A. No infirmiry at this location.	1
11	Are vital signs done daily when required?	X			4/4/2013 8:04 PM Entered By: Kathy Campbell	1

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					N/A. No infirmary at this location.	
12	Are there nursing care plans that are reviewed weekly and are signed and dated?	X			4/4/2013 8:04 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1
13	Are medications and supplies checked regularly, and who is assigned to do it? [NCCHC Standard P-D-03]	X			4/4/2013 8:04 PM Entered By: Kathy Campbell N/A. No infirmary at this location.	1