

### September 2013 TUCSON 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			<p>9/28/2013 10:49 PM Entered By: Marlana Bedoya            There were (10) intakes during the month of September. All (10) had the initial Nursing intake exam performed, followed by the Provider intake exam performed by day two of the IMs arrival.</p> <p>Inmate [REDACTED] - Arrived 9/04.            Inmate [REDACTED] - Arrived 9/05.            Inmate [REDACTED] - Arrived 9/11.            Inmate [REDACTED] - Arrived 9/11.            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/25.            Inmate [REDACTED] - Arrived 9/25.            Inmate [REDACTED] - Arrived 9/25.</p>	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			<p>9/28/2013 10:56 PM Entered By: Marlana Bedoya            There were (10) intakes during the month of September. All (10) had the Mental Health assessment performed however; (5) had no date on the documentation made by Ms. Smith, who is a new employee. This was brought to her attention during the audit, she explained that this was an oversight on her behalf, and she would be diligent to put the date on her documentation moving forward.</p> <p>Inmate [REDACTED] - Arrived 9/04.            Inmate [REDACTED] - Arrived 9/05.            Inmate [REDACTED] - Arrived 9/11. (No date)            Inmate [REDACTED] - Arrived 9/11. (No date)            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/18.            Inmate [REDACTED] - Arrived 9/25. (No date)            Inmate [REDACTED] - Arrived 9/25. (No date)            Inmate [REDACTED] - Arrived 9/25. (No date)</p>	2

**September 2013 TUCSON 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>9/30/2013 9:41 AM Entered By: Marlena Bedoya</p> <p>There are (8) yards at ASP-Tucson. A cumulative total for this audit period is as follows:</p> <p>There were (11) missed sick call lines discovered among the yards.</p> <p>There were (69) lines that were not put into the TOS system for IM turn out tickets informing Operations that IMs had medical appointments the following day.</p> <p>Total backlog for the entire Complex for this audit period is as follows:</p> <p>HNRS - (357).            CHARTS requiring Provider review - (226).            NURSELINE backlog - (303).            PROVIDER LINE backlog - (535).</p> <p>Yard by Yard:</p> <p>SANTA RITA: Audit date range (8/23-9/20).</p> <p>Sickcall was held five days per week. Days not in TOS system – Nurse lines: 8/23, 8/26, 8/27, 8/28, 8/29, 8/30. 9/03, 9/04, 9/05, 9/06, 9/09, 9/10, 9/11, 9/12, 9/13, 9/16, 9/17, 9/18, and 9/19. Provider lines not input were: 8/23, 8/26, 8/27, 9/04, and 9/08.            Backlogs - HNRS (31), Charts (43), Nurseline (39), Provider line has an increase from 59 last month to (88).</p> <p>WINCHESTER: Audit date range (8/26-9/20).</p> <p>Sickcall was held five days per week. Days not in TOS system - Nurse lines: 8/26, 8/30, 9/04, 9/05, 9/10, 9/11, 9/13, and 9/18. All Provider lines were input into TOS.            Backlogs - HNRS (20), Charts (22), Nurseline (21), Provider line has an increase from 63 last month to (128).</p> <p>CIMARRON: Audit date range (8/27-9/20).</p> <p>There is a North and South yard which hold different custody inmates therefore; a line must be performed for both yards Mon-FRI. No sickcall was not held on 9/06 and 9/12 (North side). No documentation or IRs could be located as to an explanation. This auditor checked with yard Administration, whereby they stated there was no hard lock down during the month, and IMs could have been brought to Medical for sickcall.            Days not in TOS system – Nurse lines: 9/06 (North &amp; South), 9/12 (South), 9/13 (South), 9/16 (North &amp; South), 9/17 (North &amp; South), 9/18 (North &amp; South), and 9/20 (North &amp; South). Provider lines were all input into TOS.            Backlogs - HNRS (05), Charts – Showed a slight increase from last month from 17 to (28), Nurseline (12), Provider line showed an increase from last month from 51 to</p>	1

September 2013 TUCSON COMPLEX

					<p>(105).</p> <p>RINCON MINORS: Audit date range (9/02-9/27). On the audit date there were only 53 minors currently being detained on the yard.</p> <p>Documentation (sickcall logs) was found for only five days 9/19, 9/20, 9/22, 9/23 and 9/26 reflecting IMs being seen. That leaves (14) days unaccounted for with no documentation reflecting that a line was held, or that there was no need, due to no HNRs being submitted.</p> <p>No Nurselines were put into the TOS system. The Provider line held on 9/26 was put into TOS.</p> <p>Backlogs - There is no system in place I ke all of the other yards to track HNRs, Charts needing reviewed, Nurseline backlogs, or Provider line backlogs.</p> <p>RINCON WEST MEDICAL: Audit date range (8/20-9/16).</p> <p>No sickcall was held on 8/21. No documentation or IR was located as to an explanation.</p> <p>Nurse lines were not put into the TOS system for 9/03, 9/09, and 9/10. Provider lines were not put into the TOS system for 9/03 and 9/09.</p> <p>Backlogs - HNRs (23), Charts increase from last month's 27 to (59), Nurseline (14), Provider line (62).</p> <p>WHETSTONE: Audit date range (8/12-9/10).</p> <p>No sickcall was held on 8/23, 9/03, and 9/06. No documentation or IRs could be located as an explanation.</p> <p>All scheduled lines were put into the TOS system.</p> <p>Backlogs - HNRs (250) same as last month, Charts (37),Nurseline increase from last month's 86 to (168), Provider line (100).</p> <p>CATALINA:Audit date range (8/07-9/13).</p> <p>No sickcall was held on 8/14, and 8/23. No documentation or IRs could be located as an explanation.</p> <p>All days were input into the TOS system.</p> <p>Backlogs - HNRs (0), Charts (11), Nurseline (05), Provider line (26).</p> <p>MANZANITA: Audit date range (8/16-9/13).</p> <p>Sickcall is being held five days per week. All scheduled lines were input into the TOS system.</p> <p>Backlogs - HNRs (28), Charts (26), Nurseline increased a bit from last month at 16 to (30), Provider line increased a bit from last month at 14 to (26).</p>	
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>9/29/2013 7:24 AM Entered By: Marlana Bedoya</p> <p>There are (8) yards at ASP-Tucson. (10) charts were pulled randomly per yard during this audit month - from sick call lists, the daily Field Briefing reports whereby an IM</p>	1

September 2013 TUCSON COMPLEX

had been sent out to the Hospital, from Grievance Appeals, and from concerns shared from staff.  
Of the (80) charts reviewed, ( 56 ) did not meet performance measure requirements. The totals could actually be higher in this performance measure given multiple HNRs in many cases. The breakdown is listed per yard:

SANTA RITA: (10) of (10) charts were non-compliant.

Inmate [REDACTED] – HNR dtd 8/05. Seen 8/14.

Inmate [REDACTED] – HNR dtd 8/03. Seen 8/19 and referred to the Provider.

Inmate [REDACTED] – HNRs dtd 8/07. Seen and signed a refusal on 8/27.

Inmate [REDACTED] – HNR dtd 8/01. Seen 8/19 and referred to the Provider.

Inmate [REDACTED] – HNRs dtd 8/23. Seen and signed a refusal on 9/04.

Inmate [REDACTED] – HNRs dtd 8/23. Seen and signed a refusal on 9/04.

Inmate [REDACTED] – HNRs dtd 8/30. Seen and signed a refusal on 9/11.

Inmate [REDACTED] – HNR dtd 9/06. Seen on 9/11 & 9/23 with referrals to Optometry. As of 9/24, IM had not been seen yet. IMs chart brought to the attention of the unit Nursing Manager.

Inmate [REDACTED] – No recent HNRs however, a review of the record showed an Urgent consult dtd 9/04 for a Renal/Bladder US to r/o cancer. As of 9/24 nothing was noted in chart that IM had been counseled for the appointment. IMs chart brought to the attention of the unit Nursing Manager.

Inmate [REDACTED] – HNR dtd 9/10. Seen 9/18.

WINCHESTER: (09) of (10) charts non-compliant.

Inmate [REDACTED] – HNR dtd 8/19. Not Seen. Refusal found in chart signed by two Nurses vs. the IM. HNR dtd 9/18 for an inhaler. Chronic Care due, inhaler reordered without the IM being seen.

Inmate [REDACTED] – HNR dtd 8/12. Not Seen. Refusal found in chart signed by two Nurses vs. the IM.

Inmate [REDACTED] – HNRs dtd 8/21 & 9/11 for the same thing. Seen 9/17. The note was not finished, meds were reordered. There was no MAR in chart or book.

Inmate [REDACTED] – HNR dtd 8/13. IM not seen as of 9/30. Refusal found in chart signed by two Nurses vs. the IM.

Inmate [REDACTED] – No HNR, or note, but there was a Refusal signed on 9/13 which was incomplete therefore you could not tell what he was called to medical for and he refused.

Inmate [REDACTED] – HNR dtd 8/21. Seen and signed refusal on 9/04.

Inmate [REDACTED] – HNR dtd 9/10/24. Seen 9/16.

Inmate [REDACTED] - IM scheduled for CC. He refused. He has been rescheduled for 10/08.

Inmate [REDACTED] – HNR dtd 9/13. Seen 9/19.

Inmate [REDACTED] – HNR dtd 9/04. IM



September 2013 TUCSON COMPLEX

seen 9/11.

CIMARRON: (6) of (10) charts non-compliant.

Inmate [REDACTED] – N/A. No recent HNRs.

Inmate [REDACTED] – No recent HNRs. Last Chronic care dtd May 2011. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNRs dtd 9/07 & 9/13 requesting results of his labwork. Lab results in chart dtd 8/30. IM is HEP C+. As of 9/25 he has not been seen for this issue. HNR dtd 9/02 for LBP. As of 9/25, IM has not been seen.

Inmate [REDACTED] – HNR dtd 9/09 requesting FLU shot. Flu shots are not being offered yet.

Inmate [REDACTED] – HNR dtd 9/03. As of 9/25 he has not been seen yet. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNR dtd 9/06. Seen and signed a refusal on 9/09.

Inmate [REDACTED] – N/A. No recent HNRs however, IMs last PPD is dtd 3/12/12.

Inmate [REDACTED] – HNR dtd 9/10. Seen 9/13.

Inmate [REDACTED] – HNR dtd 8/30. Seen 9/05. HNR dtd 8/24. Seen 9/05.

Inmate [REDACTED] – HNR dtd 8/29. Seen 9/05.

RINCON MINORS: (3) of (10) charts non-compliant.

Inmate [REDACTED] – HNR dtd 9/04. Seen 9/04. There was no note. Only notation was found on HNR.

Inmate [REDACTED] – HNR dtd 9/09. Seen 9/09.

Inmate [REDACTED] – HNR dtd 9/09. Seen 9/09.

Inmate [REDACTED] – No HNRs. Intake PE dtd 9/26 had Xray ordered. Chart was filed. Brought to the attention of the Nurse on duty.

Inmate [REDACTED] – No HNRs. Intake PE completed.

Inmate [REDACTED] – HNR dtd 9/05. Seen 9/11.

Inmate [REDACTED] – No recent HNRs. Seen for ICS dtd 9/14 for Chemical agents.

Inmate [REDACTED] – HNR dtd 9/18. Seen 9/23.

Inmate [REDACTED] – No recent HNRs. Seen for ICS dtd 9/11 for right hand.

Inmate [REDACTED] – HNR dtd 8/26. Seen 9/26.

RINCON WEST MEDICAL: (9) of (10) charts non-compliant.

Inmate [REDACTED] – No recent HNRs however, IM had a 7mm TB dtd 6/1/2012, no seen since for issue. He was diagnosed in Yuma 6/2012 HEP C+ and not seen yet. Unreviewed labs were in chart dtd 1/2012. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – No recent HNRs however, new to Rincon 2/2013 needs PPD, and Cc visit for Hep C+. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNR dtd 8/15. Not seen

September 2013 TUCSON COMPLEX

yet. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNR dtd on 8/13. IM seen on 9/13 regarding a hernia. Note did not state if the hernia was reducible or not. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNR dtd 8/03. IM seen 8/15 and referred to a Provider.

Inmate [REDACTED] - HNR dtd 8/23. Not seen yet. Brought to the attention of the Nursing Supv. HNR dtd 9/05 for different issue. IM seen 9/11.

Inmate [REDACTED] – HNR dtd 8/31. IM signed a refusal on 9/03.

Inmate [REDACTED] – No recent HNRs however, there was a blank CC form dtd 9/03. As of 9/18 IM still had not been seen.

Inmate [REDACTED] – No recent HNRs however, CC was due 6/2013, and PPD due 5/2013. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] - HNRs dtd 5/03. IM seen 5/28 & 7/23 and referred to a Provider. He was finally seen by the Provider on 8/07.

WHETSTONE: (10) of (10) charts were non-compliant.

Inmate [REDACTED] – HNR dtd 8/26. Not seen by Nursing, referred to Provider. Provider saw IM on 9/09.

Inmate [REDACTED] – HNR dtd 7/28. IM seen 8/08 and referred to the Provider.

Inmate [REDACTED] – HNR dtd 7/08 & 8/20 for the same issue. Seen 7/22 by Nursing, referred to the Provider.

Inmate [REDACTED] – HNR dtd 8/08. IM seen on 9/04.

Inmate [REDACTED] – HNR dtd 8/19. Seen by Nursing 9/04.

Inmate [REDACTED] – IM found to be PPD + on 8/29. Clinically seen on 9/03.

Inmate [REDACTED] – HNR dtd 8/16. IM seen on 8/30 and was referred to the Provider.

Inmate [REDACTED] – HNR dtd 8/22. Seen 8/30 by the Provider.

Inmate [REDACTED] – IM arrived from ASP-Marana on 8/05 with pending Urgent consult to Hematology/Oncology. Urgent consult was dtd as written/faxed to the Clinical coordinator on 8/07. As of 9/11 there was no follow-up. This monitor checked and the Clinical coordinator states he had not received or moved forward with scheduling. This monitor hand-carried the paper work to the Clinical coordinator on 9/12. Brought to the attention of the Nursing Supv.

Inmate [REDACTED] – HNR dtd 8/15. Seen 8/28.

CATALINA: (04) of (10) charts non-compliant.

Inmate [REDACTED] – HNR dtd 8/09. HNR marked as seen, as of 9/13 there was no note regarding the encounter. Brought to the attention of the Nurse on duty.

Inmate [REDACTED] – HNR dtd 9/10. Seen 9/11.

September 2013 TUCSON COMPLEX

				<p>Inmate [redacted] – HNR dtd 8/01. IM not seen by Nursing. Seen by a Provider on 8/07.</p> <p>Inmate [redacted] – HNR dtd 8/06 &amp; 8/25 requesting to be seen by MH. As of 9/13 IM still had not been seen. Brought to the attention of the Nurse on duty. HNR dtd 8/16. IM not seen by Nursing. Seen by a Provider on 8/21 and consult was written for surgery. As of 9/13 there was no documentation regarding progress of surgery consult. Brought to the attention of the Nurse on duty.</p> <p>Inmate [redacted] – There were not recent HNRs in chart. IM was seen as an emergency on 8/21 for a bug bite.</p> <p>Inmate [redacted] – HNRs dtd 8/09 &amp; 8/15. Seen 8/19 and referred to Optometry. As of 9/13 IM still had not been seen. Brought to the attention of the Nurse on duty.</p> <p>Inmate [redacted] – There were not recent HNRs in chart. IM was seen as an emergency on 8/16 for a toe injury.</p> <p>Inmate [redacted] – There were not recent HNRs in chart. IM was seen 8/14 for CC.</p> <p>Inmate [redacted] –</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>9/29/2013 8:05 AM Entered By: Marlena Bedoya</p> <p>Of the (80) charts reviewed, (13) did not meet performance measure requirements. The breakdown is listed per yard:</p> <p>SANTA RITA: (03) of (10) encounters were non-compliant.</p> <p>Inmate [redacted] – Encounter dtd 8/19, LPN Hobbs.</p> <p>Inmate [redacted] – Encounter dtd 8/09, LPN Hobbs. Encounter dtd 8/21, NP Holder.</p> <p>WINCHESTER: (01) of (10) encounters were non-compliant.</p> <p>Inmate [redacted] – Encounter dtd 9/05 had no RR or Wt, RN Otto.</p> <p>CIMARRON: (01) of (10) charts non-compliant.</p> <p>Inmate [redacted] – Encounter dtd 9/05 stated weight as deferred, RN Benefield.</p> <p>RINCON MINORS: (3) of (10) charts non-compliant.</p> <p>Inmate [redacted] – Encounter dtd 8/14 had no weight recorded, RN Anderson.</p> <p>Inmate [redacted] – Encounter dtd 9/23 had no weight recorded, RN Anderson.</p> <p>Inmate [redacted] – Encounter dtd 9/23 had no weight recorded, RN Anderson.</p> <p>RINCON WEST MEDICAL: (10) of (10) charts compliant.</p> <p>WHETSTONE: (02) of (10) charts were non-compliant.</p> <p>Inmate [redacted] – Encounter dtd 7/22 had no RR recorded, RN Staples.</p> <p>Inmate [redacted] – Encounter dtd 9/04 had no vitals recorded at all, RN D. Anderson.</p> <p>CATALINA: (02) of (10) charts non-</p>	1

September 2013 TUCSON COMPLEX

				<p>compliant.  <b>Inmate</b> [redacted] – Encounter dtd 8/19 had no BP recorded, RN Larson.  <b>Inmate</b> [redacted] – Encounter dtd 8/16 had no weight recorded, RN Larson.</p> <p>MANZANITA: (01) of (10) charts non-compliant.  <b>Inmate</b> [redacted] – Encounter dtd 9/09 had no vitals at all recorded, RN Seidel. The note states the encounter took place in Detention. IMs are to be seen in a clinical setting when they are being housed in Detention. There is a small room where Nursing sees IMs in this Detention area therefore; a scale and vitals equipment should be kept and/or accounted for there to enable them to thoroughly complete an encounter note.</p> <p>Even though there were findings, overall this auditor is rating this performance measure GREEN in the MGAR. The findings will be shared with the FHA and DON.</p>	
4	<p>Is the SOAPE format being utilized in the inmate medical record for encounters? [DO 1104, HSTM Chapter 5, Section 1.3]</p>	X		<p>9/29/2013 8:28 AM Entered By: Marlena Bedoya  Of the (80) charts reviewed, (03) did not meet performance measure requirements. The breakdown is listed per yard:</p> <p>SANTA RITA: (03) of (10) encounters were non-compliant.  <b>Inmate</b> [redacted] – Encounter dtd 8/19, LPN Hobbs.  <b>Inmate</b> [redacted] – Encounter dtd 8/09, LPN Hobbs. Encounter dtd 8/21, NP Holder.</p> <p>WINCHESTER: (10) of (10) encounters were compliant.</p> <p>CIMARRON: (10) of (10) charts were compliant.</p> <p>RINCON MINORS: (10) of (10) charts were compliant.</p> <p>RINCON WEST MEDICAL: (10) of (10) charts were compliant.</p> <p>WHETSTONE: (10) of (10) charts were compliant.</p> <p>CATALINA: (10) of (10) charts were compliant.</p> <p>MANZANITA: (01) of (10) charts non-compliant.  <b>Inmate</b> [redacted] – Encounter dtd 9/09, RN Seidel.</p> <p>Even though there were findings, overall this auditor is rating this performance measure GREEN in the MGAR. The findings will be shared with the FHA and</p>	1

September 2013 TUCSON COMPLEX

				DON.	
5	Are referrals to providers from sick call being seen within seven (7) days? [P-E-07]		X	<p>9/30/2013 9:34 AM Entered By: Marlena Bedoya            There are (8) yards at ASP-Tucson. (10) Charts were pulled randomly per yard during this audit month. Not all encounters require a referral to see the Provider.</p> <p>Of the (80) charts reviewed, (25) encounters showed Nursing having referred IMs forward for intervention by the Provider.</p> <p>Of the (25) referrals, (21) did not meet compliance performance measures. The breakdown is listed per yard:</p> <p>SANTA RITA: (04) of (04) referrals were non-compliant.</p> <p><b>Inmate</b> ██████████ – Referred 8/14. Seen 8/26.  <b>Inmate</b> ██████████ – On 8/26 when the Provider saw the IM, he requested a follow up with him in two weeks. As of 9/24 the IM had not been seen yet. PL schedule was checked, and he also was not in the book. Brought to the attention of the unit Nursing Manager.  <b>Inmate</b> ██████████ – Referred on 9/11 to see Optometry. As of 9/24, IM had not been seen yet. IMs chart brought to the attention of the unit Nursing Manager.  <b>Inmate</b> ██████████ – Referred by Urgent consult dtd 9/04 for a Renal/Bladder US to r/o cancer. As of 9/24 nothing was noted in chart that IM had been counseled for the appointment. IMs chart brought to the attention of the unit Nursing Manager.</p> <p>WINCHESTER: (04) of (04) requiring referrals were non-compliant.</p> <p><b>Inmate</b> ██████████ – IM was due for CC/HEP C. Last CC visit 2/2011. IM now scheduled after IMs chart brought to the attention of the unit Nursing Manager.  <b>Inmate</b> ██████████ – IM was due for CC/Non-Hodgkins Lymphoma. Routine consult dtd 6/06/13 to Nephrology has still not been scheduled. IMs chart brought to the attention of the unit Nursing Manager.  <b>Inmate</b> ██████████ – Referred 9/16. As of 9/30/13 IM still not seen. IMs chart brought to the attention of the unit Nursing Manager.  <b>Inmate</b> ██████████ – Referred 9/11. As of 9/30/13 IM still not seen. IMs chart brought to the attention of the unit Nursing Manager.</p> <p>CIMARRON: (02) of (02) requiring referrals were non-compliant.</p> <p><b>Inmate</b> ██████████ – Referred 9/05. Seen 9/20.  <b>Inmate</b> ██████████ – Referred 9/05. Seen 9/20.</p> <p>RINCON MINORS: (02) of (02) charts requiring referral were compliant.</p> <p><b>Inmate</b> ██████████ – Referred 9/23. Seen 9/26.</p>	1

September 2013 TUCSON COMPLEX

				<p>Inmate [REDACTED] – Referred 9/11. Seen 9/13.</p> <p>RINCON WEST MEDICAL: (03) of (03) requiring referral were non-compliant.</p> <p>Inmate [REDACTED] – Referred 8/15. Seen 9/10.</p> <p>Inmate [REDACTED] – Referred on 9/11. As of 9/18 IM not seen yet by a Provider. Brought to the attention of the Nursing Supv.</p> <p>Inmate [REDACTED] – Referred on 5/28. Seen 8/07.</p> <p>WHETSTONE: (03) of (03) charts requiring referral were non-compliant.</p> <p>Inmate [REDACTED] – Referred 8/08. Seen 9/05.</p> <p>Inmate [REDACTED] – Referred 8/20. Seen 9/06.</p> <p>Inmate [REDACTED] – Referred 8/30. AS of 9/11 IM was still not seen by the Provider. Brought to the attention of the Nursing Supv.</p> <p>CATALINA: (03) of (03) charts charts requiring referral were non-compliant.</p> <p>Inmate [REDACTED] – Referred by a Provider on 8/21 for surgery. As of 9/13 there was no documentation regarding progress of surgery consult. Brought to the attention of the Nurse on duty.</p> <p>Inmate [REDACTED] – Referred 8/19 to Optometry. As of 9/13 IM still had not been seen. Brought to the attention of the Nurse on duty.</p> <p>Inmate [REDACTED] – IM had kidney transplant in 2010. Consults written 4/2013 &amp; 6/2013. As of 9/13/2013 there was no documentation regarding progress of Nephrology consult. Brought to the attention of the Nurse on duty.</p> <p>MANZANITA: (02) of (04) charts requiring referral were non-compliant.</p> <p>Inmate [REDACTED] – Referred 8/29. Seen 9/03.</p> <p>Inmate [REDACTED] – Referred 8/29. Seen 9/03.</p> <p>Inmate [REDACTED] – Referred 8/22. As of 9/16 IM still not seen. Brought to the attention of the Nursing Supv.</p> <p>Inmate [REDACTED] – Referred 9/03. As of 9/16 IM still not seen. Brought to the attention of the Nursing Supv.</p>	
6	Are nursing protocols in place and utilized by the nurses for sick call?	X		9/28/2013 7:00 AM Entered By: Marlana Bedoya YES.	1



## September 2013 TUCSON COMPLEX

### Corrective Action Plans for Performance Measure: Sick Call (Q)

**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]**

**Level 1 Red User: Marlena Bedoya Date: 9/30/2013 9:41:09 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1.Process to address access to care, to include but not limited to:

- a.Scheduling patients
- b.Staffing

2.In-service staff on process expectations per Sick Call 2.20.2.2 contract performance outcome 1

Sick call shall be held five days a week, Monday through Friday (excluding Holidays), for all inmates (Sick Call Attachment); and site specific process

- a.Agenda/sign off sheet to verify, inclusive of all pertinent staff

3.Monitoring (Sick Call Audit Tool)

- a.Audit tools developed
- b.Weekly site results discussed with RVP
- c.Audit results discussed a monthly CQI meeting
- d.Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/RDCQI/RVP

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – All HNR s to be triaged by nursing, inclusive of MH.

**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]**

**Level 1 Amber User: Marlena Bedoya Date: 9/29/2013 7:24:45 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1.Process to address, to include but not limited to:

- a.Daily pick up.
- b.Date stamp.
- c.Triage within 24 hrs, immediate triage of patient if emergent.
- d.Seen within 48 hrs after date stamp or 72 hrs weekend/holiday.
- e.Nurse line sees patient, then to provider line when appropriate.
- f. Submit final site process to RVP.

2.In-service staff on policy titled "Routine Appointments – Request" Chapter 5, Section 3.1 ( Attachment II.2.) and per Sick Call 2.20.2.2 contract performance outcome 2 (Sick Call Attachment);

- a.Agenda/sign off sheet to verify, inclusive of all pertinent staff.

3.Monitoring (Sick Call Monitoring Tool)

- a.Audit tools developed.
- b.Weekly site results discussed with RVP.
- c.Audit results discussed a monthly CQI meeting.
- d.Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties = FHA/DON/RDCQI/RVP

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

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

**Level 1 Red User: Marlena Bedoya Date: 9/30/2013 9:34:44 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1.In-service all staff including providers on Sick Call 2.20.2.2 contract performance outcome 5 (Sick Call Attachment); Seen by Physician or Midlevel within 7 days

- a.Agenda/sign off sheet to verify

2.Monitoring (Sick Call Monitoring Tool)

## September 2013 TUCSON COMPLEX

- a. Audit tools developed
- b. Weekly site results discussed with RVP
- c. Audit results discussed a monthly CQI meeting
- d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/Medical Director/RDCQI/RVP

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

September 2013 TUCSON COMPLEX

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		<p>9/9/2013 4:10 PM Entered By: Trudy Dumkrieger</p> <p>162 urgent consults on August report some carrying over from previous months. 5 consults denied, 5 asking for them to be resubmitted with more info, 16 have been received with no action as of 9/6/13, and 34 have been completed. There are 102 that have been approved and either scheduled not seen yet or are still pending. The following are ones that are over the 30 day time frame:</p> <p>August Urgent consults</p> <table border="1"> <thead> <tr> <th>IM #</th> <th>Date Written</th> <th>Date approved</th> <th>Status</th> </tr> </thead> <tbody> <tr><td>Inmate</td><td>7/15/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/19/13</td><td>6/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/19/13</td><td>6/20/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>6/7/13</td><td>6/14/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/3/13</td><td>7/3/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/24/13</td><td>7/26/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/2/13</td><td>7/19/13</td><td>sch.9/3/13</td></tr> <tr><td>Inmate</td><td>7/15/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/31/13</td><td>8/2/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/29/13</td><td>6/26/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/13/13</td><td>6/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/17/13</td><td>7/19/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/17/13</td><td>8/2/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/15/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>8/2/13</td><td>8/6/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/2/13</td><td>7/19/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/1/13</td><td>7/12/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/17/13</td><td>6/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/17/13</td><td>7/17/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/3/13</td><td>7/12/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/19/13</td><td>6/20/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/16/13</td><td>7/22/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/9/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>8/2/13</td><td>8/5/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/18/13</td><td>6/20/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/7/13</td><td>6/14/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/5/13</td><td>6/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>8/1/13</td><td>8/1/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/18/13</td><td>7/18/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/22/13</td><td>7/23/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>8/1/13</td><td>8/5/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/26/13</td><td>6/28/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/1/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/20/13</td><td>6/28/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/22/13</td><td>7/26/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/9/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/3/12</td><td>7/3/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/16/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/16/13</td><td>7/12/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/1/13</td><td>7/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/12/13</td><td>6/13/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/10/13</td><td>7/12/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/20/13</td><td>6/28/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/14/13</td><td>6/19/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>6/7/13</td><td>6/14/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>6/14/13</td><td>6/19/13</td><td>scheduled</td></tr> <tr><td>Inmate</td><td>7/11/13</td><td>7/12/13</td><td>pending</td></tr> <tr><td>Inmate</td><td>7/16/13</td><td>7/22/13</td><td>scheduled.</td></tr> </tbody> </table>	IM #	Date Written	Date approved	Status	Inmate	7/15/13	7/19/13	scheduled	Inmate	6/19/13	6/19/13	scheduled	Inmate	6/19/13	6/20/13	pending	Inmate	6/7/13	6/14/13	pending	Inmate	7/3/13	7/3/13	pending	Inmate	7/24/13	7/26/13	pending	Inmate	7/2/13	7/19/13	sch.9/3/13	Inmate	7/15/13	7/19/13	scheduled	Inmate	7/31/13	8/2/13	scheduled	Inmate	6/29/13	6/26/13	scheduled	Inmate	6/13/13	6/19/13	scheduled	Inmate	7/17/13	7/19/13	pending	Inmate	7/17/13	8/2/13	scheduled	Inmate	7/15/13	7/19/13	scheduled	Inmate	8/2/13	8/6/13	scheduled	Inmate	7/2/13	7/19/13	pending	Inmate	7/1/13	7/12/13	scheduled	Inmate	6/17/13	6/19/13	scheduled	Inmate	7/17/13	7/17/13	scheduled	Inmate	7/3/13	7/12/13	scheduled	Inmate	6/19/13	6/20/13	scheduled	Inmate	7/16/13	7/22/13	scheduled	Inmate	7/9/13	7/19/13	scheduled	Inmate	8/2/13	8/5/13	scheduled	Inmate	6/18/13	6/20/13	scheduled	Inmate	6/7/13	6/14/13	scheduled	Inmate	6/5/13	6/19/13	scheduled	Inmate	8/1/13	8/1/13	scheduled	Inmate	7/18/13	7/18/13	scheduled	Inmate	7/22/13	7/23/13	scheduled	Inmate	8/1/13	8/5/13	scheduled	Inmate	6/26/13	6/28/13	scheduled	Inmate	7/1/13	7/19/13	scheduled	Inmate	6/20/13	6/28/13	scheduled	Inmate	7/22/13	7/26/13	pending	Inmate	7/9/13	7/19/13	scheduled	Inmate	7/3/12	7/3/13	scheduled	Inmate	7/16/13	7/19/13	scheduled	Inmate	7/16/13	7/12/13	scheduled	Inmate	7/1/13	7/19/13	scheduled	Inmate	6/12/13	6/13/13	scheduled	Inmate	7/10/13	7/12/13	scheduled	Inmate	6/20/13	6/28/13	scheduled	Inmate	6/14/13	6/19/13	pending	Inmate	6/7/13	6/14/13	scheduled	Inmate	6/14/13	6/19/13	scheduled	Inmate	7/11/13	7/12/13	pending	Inmate	7/16/13	7/22/13	scheduled.	2
IM #	Date Written	Date approved	Status																																																																																																																																																																																																							
Inmate	7/15/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	6/19/13	6/19/13	scheduled																																																																																																																																																																																																							
Inmate	6/19/13	6/20/13	pending																																																																																																																																																																																																							
Inmate	6/7/13	6/14/13	pending																																																																																																																																																																																																							
Inmate	7/3/13	7/3/13	pending																																																																																																																																																																																																							
Inmate	7/24/13	7/26/13	pending																																																																																																																																																																																																							
Inmate	7/2/13	7/19/13	sch.9/3/13																																																																																																																																																																																																							
Inmate	7/15/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/31/13	8/2/13	scheduled																																																																																																																																																																																																							
Inmate	6/29/13	6/26/13	scheduled																																																																																																																																																																																																							
Inmate	6/13/13	6/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/17/13	7/19/13	pending																																																																																																																																																																																																							
Inmate	7/17/13	8/2/13	scheduled																																																																																																																																																																																																							
Inmate	7/15/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	8/2/13	8/6/13	scheduled																																																																																																																																																																																																							
Inmate	7/2/13	7/19/13	pending																																																																																																																																																																																																							
Inmate	7/1/13	7/12/13	scheduled																																																																																																																																																																																																							
Inmate	6/17/13	6/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/17/13	7/17/13	scheduled																																																																																																																																																																																																							
Inmate	7/3/13	7/12/13	scheduled																																																																																																																																																																																																							
Inmate	6/19/13	6/20/13	scheduled																																																																																																																																																																																																							
Inmate	7/16/13	7/22/13	scheduled																																																																																																																																																																																																							
Inmate	7/9/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	8/2/13	8/5/13	scheduled																																																																																																																																																																																																							
Inmate	6/18/13	6/20/13	scheduled																																																																																																																																																																																																							
Inmate	6/7/13	6/14/13	scheduled																																																																																																																																																																																																							
Inmate	6/5/13	6/19/13	scheduled																																																																																																																																																																																																							
Inmate	8/1/13	8/1/13	scheduled																																																																																																																																																																																																							
Inmate	7/18/13	7/18/13	scheduled																																																																																																																																																																																																							
Inmate	7/22/13	7/23/13	scheduled																																																																																																																																																																																																							
Inmate	8/1/13	8/5/13	scheduled																																																																																																																																																																																																							
Inmate	6/26/13	6/28/13	scheduled																																																																																																																																																																																																							
Inmate	7/1/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	6/20/13	6/28/13	scheduled																																																																																																																																																																																																							
Inmate	7/22/13	7/26/13	pending																																																																																																																																																																																																							
Inmate	7/9/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/3/12	7/3/13	scheduled																																																																																																																																																																																																							
Inmate	7/16/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/16/13	7/12/13	scheduled																																																																																																																																																																																																							
Inmate	7/1/13	7/19/13	scheduled																																																																																																																																																																																																							
Inmate	6/12/13	6/13/13	scheduled																																																																																																																																																																																																							
Inmate	7/10/13	7/12/13	scheduled																																																																																																																																																																																																							
Inmate	6/20/13	6/28/13	scheduled																																																																																																																																																																																																							
Inmate	6/14/13	6/19/13	pending																																																																																																																																																																																																							
Inmate	6/7/13	6/14/13	scheduled																																																																																																																																																																																																							
Inmate	6/14/13	6/19/13	scheduled																																																																																																																																																																																																							
Inmate	7/11/13	7/12/13	pending																																																																																																																																																																																																							
Inmate	7/16/13	7/22/13	scheduled.																																																																																																																																																																																																							
2	Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]		X		<p>9/30/2013 2:28 PM Entered By: Trudy Dumkrieger Amber</p> <p>9/30/2013 12:42 PM Entered By: Trudy</p>	2																																																																																																																																																																																																				

September 2013 TUCSON COMPLEX

Dumkrieger  
IPC/HU9 no pending reviews.

9/30/2013 9:20 AM Entered By: Trudy Dumkrieger  
Rincon 10 charts reviewed 9/10 charts not in compliance.  
**Inmate** Report dated 9/6/13 not reviewed by 9/26/13.  
**Inmate** Report dated 8/29/13 not reviewed by 9/26/13. Labs reported 8/23/13 not reviewed by 9/26/13.  
**Inmate** Consult req. submitted 7/9/13 resubmit with more data. Not reviewed by 9/26/13.  
**Inmate** Non-formulary denied 9/13/11 not reviewed by 9/26/13.  
**Inmate** Communication to write a consult for diabetic eye exam written 9/5/13 not reviewed by 9/26/13.  
**Inmate** Lab reported 8/2/13 not reviewed by 9/26/13. Urology consult report 8/7/13 not reviewed by 9/26/13.  
**Inmate** Communique to clarify lab orders written 9/11/13 not reviewed 9/26/13.  
**Inmate** Laabs reported 6/8/13 not reviewed 9/26/13.  
**Inmate** labs reported 7/21/13 not reviewed 9/26/13.

9/25/2013 3:09 PM Entered By: Trudy Dumkrieger  
Whetstone 10 charts reviewed 2/10 out of compliance.  
**Inmate** Report done 8/14/13 not reviewed by 9/16/13.  
**Inmate** Report done 8/12/13 not reviewed 9/16/13.

9/25/2013 2:10 PM Entered By: Trudy Dumkrieger  
Manzanita  
**Inmate** Report 9/4-9/5 Not reviewed as of 9/16/13

9/25/2013 11:53 AM Entered By: Trudy Dumkrieger  
Minors/CDU 10 charts combined reviewed. 5/10 charts not in compliance.  
CDU **Inmate** Operative report 8/1/13 not reviewed by 9/25/13. X-ray report 8/1/13 dnot reviewed until 9/3/13.  
CDU **Inmate** PT/INR reported 9/17/13 not reviewed by 9/25/13.  
CDU **Inmate** Rray dated 8/28/13 not reviewed by 9/25/13  
Minors **Inmate** X-ray 9/12/13 not reviewed by 9/25/13.  
Minors **Inmate** Labs reported 9/12/13 not reviewed by 9/25/13.

9/12/2013 12:29 PM Entered By: Trudy Dumkrieger  
Winchester no charts pending provider review.

9/10/2013 1:00 PM Entered By: Trudy Dumkrieger  
Santa Rita 10 charts reviewed 10/10 charts not compliant.  
**Inmate** Labs 8/21/13 not reviewed 9/9/13  
**Inmate** X-Ray 8/29/13 not reviewed 9/9/13  
**Inmate** Hand x-ray 8/29/13 not reviewed 9/9/13

**September 2013 TUCSON COMPLEX**

				<p>Inmate Labs 8/28/13 not reviewed 9/9/13                  Inmate Labs 8/21/13 not reviewed 9/9/13                  Inmate Opthomology consult 8/17/13, labs 8/21/13, Infectious Dis. consult 8/21/13 not reviewed by 9/9/13.                  Inmate labs 8/28/13 not reviewed 9/9/13                  Inmate Urology consult 8/19/13 not reviewed 9/9/13                  Inmate Orthotics consult 8/19/13 not reviewed 9/9/13.</p> <p>9/10/2013 11:15 AM Entered By: Trudy Dumkrieger                  Cimarron 10 charts reviewed 7/10 charts not in compliance.</p> <p>Inmate                  Inmate                  Inmate                  Inmate                  Inmate                  Inmate</p>	
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		9/30/2013 2:29 PM Entered By: Trudy Dumkrieger	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		9/10/2013 3:04 PM Entered By: Trudy Dumkrieger	2
5	Do all inpatient admissions have documented utilization review of admission and evidence of discharge planning? [CC 2.20.2.3]	X		9/30/2013 12:41 PM Entered By: Trudy Dumkrieger  9/30/2013 9:21 AM Entered By: Trudy Dumkrieger  9/23/2013 12:10 PM Entered By: Trudy Dumkrieger	2

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

**1 Are urgent consultations being scheduled to be seen within thirty (30) days of the consultation being initiated? [CC 2.20.2.3]**

**Level 2 Amber User: Trudy Dumkrieger Date: 9/9/2013 4:10:01 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized monitoring process
2. Communicate expectations via FHA/DON at quarterly training Regional office and obtain sign off sheet to verify
3. Monitoring (UM Audit Tool)
  - a. Audit tools developed
  - b. Weekly site results discussed with RVP
  - c. Audit results discussed a monthly CQI meeting
  - d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = ARMD/RDON/RVP/RCQI/FHA/DON

## September 2013 TUCSON COMPLEX

Target Date -11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

1. Standardized process to address, to include but not limited to:
  - a. Approved consults scheduled/documented within 5 days by clinical coordinator
2. Schedule and conduct training for all clinical coordinators
  - a. Agenda/sign off sheet to verify
3. Monitoring (UM Audit Tool)
  - a. Audit tools developed
  - b. Weekly site results discussed with RVP
  - c. Audit results discussed a monthly CQI meeting
  - d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = DON/Clinical Systems Business Analyst II/FHA/DON/RDCQI/RVP

Target Date - 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

**2 Are consultation reports being reviewed by the provider within seven (7) days of receipt? [CC 2.20.2.3]**  
**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 2:28:53 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized monitoring process
2. Communicate expectations via FHA/DON at quarterly training Regional office and obtain sign off sheet to verify
3. Monitoring (UM Audit Tool)
  - a. Audit tools developed
  - b. Weekly site results discussed with RVP
  - c. Audit results discussed a monthly CQI meeting
  - d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = ARMD/RDON/RVP/RDCQI/DON/

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.



September 2013 TUCSON 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>9/30/2013 2:25 PM Entered By: Trudy Dumkrieger</p> <p>9/30/2013 1:40 PM Entered By: Trudy Dumkrieger</p> <p>9/17/2013 9:23 AM Entered By: Brenda McMullen Whetstone 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 9:22 AM Entered By: Brenda McMullen Manzanita 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 8:55 AM Entered By: Brenda McMullen Catalina 10 Charts reviewed 10 charts in compliance</p> <p>9/30/2013 12:52 PM Entered By: Trudy Dumkrieger Rincon/HU9 10 charts reviewed 9/10 not in compliance. Inmate HTN, Cardiac, Asthma, +PPD no plan. Inmate +PPD, HTN, Cardiac. No plan Inmate HCV, IDDM no plan. Inmate NIDDM, HTN No plan. Inmate HCV, HTN, IDDM. No plan Inmate HCV, HTN. No plan. Inmate HTN No plan Inmate Cancer, SZS. No plan. Inmate NIDDM No plan.</p> <p>9/30/2013 9:23 AM Entered By: Trudy Dumkrieger Rincon 10 charts reviewed 3/10 charts non-complianat. Inmate No treatment plan. Inmate No CC visit in current volume. Inmate No treatment plan.</p> <p>9/25/2013 11:57 AM Entered By: Trudy Dumkrieger Minors Only one Minor with CC. Inmate Plan not current.</p> <p>9/25/2013 11:55 AM Entered By: Trudy Dumkrieger CDU 10 charts reviewed 2/10 charts out of compliance. Inmate No current plan. Inmate No plan.</p> <p>9/24/2013 3:30 PM Entered By: Trudy Dumkrieger</p> <p>9/17/2013 9:23 AM Entered By: Brenda McMullen Whetstone 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 9:22 AM Entered By: Brenda McMullen Manzanita 10 charts reviewed 10 charts in compliance</p>	1

September 2013 TUCSON COMPLEX

				<p>9/17/2013 8:55 AM Entered By: Brenda McMullen Catalina 10 Charts reviewed 10 charts in compliance</p> <p>9/12/2013 10:19 AM Entered By: Trudy Dumkrieger Winchester 10 charts reviewed. 1/10 charts not n compliance. #Inmate No plan.</p> <p>9/10/2013 2:43 PM Entered By: Trudy Dumkrieger Santa Rita 10 charts reviewed. 2 out of 10 charts nn-compliant #Inmate no plan #Inmate no plan</p> <p>9/10/2013 8:24 AM Entered By: Trudy Dumkrieger CIMARRON 10 charts reviewed 3/10 not compliant #Inmate No #Inmate No #Inmate No</p> <p>9/17/2013 9:23 AM Entered By: Brenda McMullen Whetstone 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 9:22 AM Entered By: Brenda McMullen Manzanita 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 8:55 AM Entered By: Brenda McMullen Catalina 10 Charts reviewed 10 charts in compliance</p>	
2	<p>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]</p>		X	<p>9/30/2013 2:26 PM Entered By: Trudy Dumkrieger Amber</p> <p>9/30/2013 1:51 PM Entered By: Trudy Dumkrieger Manazanita 10 charts reviewed 3 charts out of compliance #Inmate HTN scheduled for 7/26/13 not done nursing notified and scheduled 9/17/13 #Inmate DM CA Cardiac HTN , no CC on chart nursing notified and scheduled 9/18/13 #Inmate Asthma HepC+, last CC 12/21/11 nursing notified and scheduled 9/20/13</p> <p>9/17/2013 8:56 AM Entered By: Brenda McMullen Catalina 10 Charts reviewed 1 chart out of compliance #Inmate SZ Last CC 3/5/12 refused 6/5/12 not rescheduled, nursing notified and rescheduled</p> <p>9/17/2013 7:20 AM Entered By: Brenda</p>	2

# September 2013 TUCSON COMPLEX

Mcmullen  
Whetstone 10 charts reviewed 4 charts out of compliance  
#Inmate SZ HTN Hep C+, no CC on chart  
#Inmate DM Hep C+, no date on CC  
#Inmate CA Cardiac HTN, HTN CA not addressed  
#Inmate Asthma/COPD HTN, no date on CC

9/30/2013 12:58 PM Entered By: Trudy Dumkrieger  
Rincon/HU9 10 charts reviewed 9/10 not in compliance.

#Inmate HTN, Cardiac, Asthma, +PPD Chart starts 4/2/13 no visits in this volume.  
#Inmate +PPD, HTN, Cardiac. Chart starts 1/30/13 no visit in this volume.  
#Inmate HCV, IDDM Chart starts 5/20/13 no visit in this volume.  
#Inmate NIDDM, HTN No visit.  
#Inmate HCV, HTN, IDDM. Last visit 2/7/13 RTC 5/20/13 did not happen.  
#Inmate HCV, HTN. chart starts 11/7/12 no visits in this volume.  
#Inmate HTN Chart starts 12/3/12 no visits in this volume.  
#Inmate Cancer, SZS. Chart starts 4/1/13 no visits in this volume.  
#Inmate NIDDM Chart starts 3/22/13 no visit in this volume.

9/30/2013 9:30 AM Entered By: Trudy Dumkrieger  
Rincon 10 charts reviewed 5/10 charts not in compliance.

#Inmate No date on last visit. RTC in 90 days.  
#Inmate Last CC visit 4/5/12. RTC in 180 days IM was released 4/16/13 and is now a RTC.  
#Inmate Last CC visit 11/1/11.  
#Inmate No CC visit in current volume.  
#Inmate Last CC visit 11/20/12 RTC in 90 days.

9/25/2013 12:01 PM Entered By: Trudy Dumkrieger  
Minors Only one minor with cc. 1/1 chart not in compliance.  
#Inmate Last visit 5/2/13 next 8/13/did not happen.

9/25/2013 12:00 PM Entered By: Trudy Dumkrieger  
CDU 10 charts reviewed, 3/10 charts not compliant.

#Inmate Last visit 4/23/13 RTC 7/13 did not happen.  
#Inmate never seen fo follow up.  
#Inmate last visit 8/14/12.

9/12/2013 10:24 AM Entered By: Trudy Dumkrieger  
Winchester 10 charts reviewed. 5/10 charts not in compliance.

#Inmate needs CC for HCV, IDDM, Cardiac, Cancer.  
#Inmate Needs CC visit. Last visit 3/7/12.  
#Inmate Needs CC visit. Last visit 9/12/12.  
#Inmate Needs CC visit. Last visit 4/8/12.  
#Inmate Asthma, HCV, CA., HTN, DM. no visit found in current chart.

September 2013 TUCSON COMPLEX

				<p>9/10/2013 2:47 PM Entered By: Trudy Dumkrieger          Sanata Rita 10 charts reviewed 4/10 chart non-compliant.          Inmate Last visit 2/26/13 next 5/23/13 did not happen.          Inmate No chronic condition in chart.          Inmate no chronic condition in chart.          Inmate last visit 11/14/12 was due 5/13 did not happen.</p> <p>9/10/2013 8:27 AM Entered By: Trudy Dumkrieger          Cimarron 10 charts reviewed 3/10 charts not complianat          Inmate no visit in chart          Inmate No visit          Inmate Last visit 9/6/12.</p> <p>9/17/2013 9:23 AM Entered By: Brenda McMullen          Manazanita 10 charts reviewed 3 charts out of compliance          #Inmate HTN scheduled for 7/26/13 not done nursing notified and scheduled 9/17/13          #Inmate DM CA Cardiac HTN , no CC on chart nursing notified and scheduled 9/18/13          #Inmate Asthma HepC+, last CC 12/21/11 nursing notified and scheduled 9/20/13</p> <p>9/17/2013 8:56 AM Entered By: Brenda McMullen          Catalina 10 Charts reviewed 1 chart out of compliance          #Inmate SZ Last CC 3/5/12 refused 6/5/12 not rescheduled, nursing notified and rescheduled</p> <p>9/17/2013 7:20 AM Entered By: Brenda McMullen          Whetstone 10 charts reviewed 4 charts out of complaince          #Inmate SZ HTN Hep C+, no CC on chart          #Inmate DM Hep C+, no date on CC          #Inmate CA Cardiac HTN, HTN CA not addressed          #Inmate Asthma/COPD HTN, no date on CC</p>	
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	<p>9/30/2013 2:26 PM Entered By: Trudy Dumkrieger          Amber</p> <p>9/30/2013 1:02 PM Entered By: Trudy Dumkrieger          Rincon/HU9 10 charts reviewed 9/10 not in compliance.          Inmate HTN, Cardiac, Asthma, +PPD No education.          Inmate +PPD, HTN, Cardiac. No education.          Inmate HCV, IDDM No education.          Inmate NIDDM, HTN No education.</p>	1

September 2013 TUCSON COMPLEX

Inmate HCV, HTN, IDDM. No acuarrent education.  
 Inmate HCV, HTN.No education.  
 Inmate HTN No education.  
 Inmate Cancer, SZS. No education.  
 Inmate NIDDM No education.

9/30/2013 9:34 AM Entered By: Trudy Dumkrieger  
 Rincon 10 charts reviewed 5/10 charts not in compliance.

Inmate Is a RTC IM. Needs PE and labs and CC visit.

Inmate No educatiopn at last visit.

Inmate No education at last visit.

Inmate No education at last visit.

Inmate No CC visit in current chart. So no education.

9/25/2013 12:33 PM Entered By: Trudy Dumkrieger

9/17/2013 9:24 AM Entered By: Brenda McMullen

Manzanita 10 charts reviewed 4 charts out of compliance

#Inmate HTN no education documented

#Inmate DM CA Cardiac HTN no education documented

#Inmate CA, no education documented

#Inmate Asthma HepC+ , no education documented

9/17/2013 9:04 AM Entered By: Brenda McMullen

Catalina 10 charts reviewed 10 charts in compliance

9/17/2013 7:23 AM Entered By: Brenda McMullen

Whetstone 10 charts reviewed 2 charts out of compliance

#Inmate SZ HTN HepC+ , no education documented

#Inmate HTN, no education documented

9/25/2013 12:04 PM Entered By: Trudy Dumkrieger

Minors. One one CC chart. 1/1 chart in compiance.

9/25/2013 12:03 PM Entered By: Trudy Dumkrieger

CDU 10 charts reviewed. 3/10 charts not in compliance.

Inmate No education.

Inmate No education.

Inmate No education.

9/12/2013 10:28 AM Entered By: Trudy Dumkrieger

Winchester 10 charts reviewed. 4/10 charts not in compiance.

Inmate No education documented

Inmate No education documented.

Inmate No education documented.

Inmate No education documented.

9/10/2013 2:50 PM Entered By: Trudy Dumkrieger

Sanata Rita 10 charts reviewed 3/10 charts

September 2013 TUCSON COMPLEX

				<p>not compliant.  <b>Inmate</b> No education  <b>Inmate</b> No education  <b>Inmate</b> No education since 11/12.</p> <p>9/10/2013 8:28 AM Entered By: Trudy Dumkrieger  Cimarron 10 charts reviewed. 3/10 charts not compliant.  <b>Inmate</b> No education.  <b>Inmate</b> No education.  <b>Inmate</b> No education.</p> <p>9/17/2013 9:24 AM Entered By: Brenda McMullen  Manzanita 10 charts reviewed 4 charts out of compliance  <b>#Inmate</b> HTN no education documented  <b>#Inmate</b> DM CA Cardiac HTN no education documented  <b>#Inmate</b> CA, no education documented  <b>#Inmate</b> Asthma HepC+ , no education documented</p> <p>9/17/2013 9:04 AM Entered By: Brenda McMullen  Catalina 10 charts reviewed 10 charts in compliance</p> <p>9/17/2013 7:23 AM Entered By: Brenda McMullen  Whetstone 10 charts reviewed 2 charts out of compliance  <b>#Inmate</b> SZ HTN HepC+ , no education documented  <b>#Inmate</b> HTN, no education documented</p>	
4	<p>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]</p>		X	<p>9/30/2013 2:27 PM Entered By: Trudy Dumkrieger  Amber</p> <p>9/30/2013 1:07 PM Entered By: Trudy Dumkrieger  Rincon/HU9 10 charts reviewed 9/10 not in compliance.  <b>Inmate</b> HTN, Cardiac, Asthma, +PPD Needs labs, EKG, peak flow.  <b>Inmate</b> +PPD, HTN, Cardiac. Needs EKG.  <b>Inmate</b> HCV, IDDM Needs labs.  <b>Inmate</b> NIDDM, HTN Needs labs, EKG, monofilament.  <b>Inmate</b> HCV, HTN, IDDM. No No diabetic eye exam, needs monofilament.  <b>Inmate</b> HCV, HTN.Needs labs, ekg.  <b>Inmate</b> HTN Needs labs, ekg.  <b>Inmate</b> Cancer, SZS. Needs blood work.  <b>Inmate</b> NIDDM Needs labs.</p> <p>9/30/2013 9:50 AM Entered By: Trudy Dumkrieger  Rincon 10 charts reviewed 5/10 charts not in compliance.  <b>Inmate</b> dNeeds EKG.  <b>Inmate</b> Needs peak flow .  <b>Inmate</b> A RTC IM needs intake labs, CC labs.  <b>Inmate</b> Needs diabetic foot exam and monofilament test.</p>	2



September 2013 TUCSON COMPLEX

9/25/2013 12:33 PM Entered By: Trudy Dumkrieger  
 9/17/2013 9:24 AM Entered By: Brenda McMullen  
 Manzanita 10 charts reviewed 6 charts out of compliance  
 #Inmate HTN , no current routine labs on chart  
 #Inmate CA, no clinical status documented  
 #Inmate DM HTN Cardiac, no clinical status documented  
 #Inmate HTN, no clinical status documented  
 #Inmate HTN DM, last labe 7/11/12  
 #Inmate Asthma HepC+, no PEFR

9/17/2013 9:05 AM Entered By: Brenda McMullen  
 Catalina 10 charts reviewed 7 charts out of compliance  
 #Inmate Cardiac Asthma no PEFR  
 #Inmate SZ Asthma HepC+, no PEFR last labs 8/10/12  
 #Inmate Asthma, HepC+, Hep C not address, no PEFR,  
 #Inmate SZ Asthma, no PEFR  
 #Inmate SZ , last labs 11/29/11  
 #Inmate Asthma SZ HTN CA, no PEFR  
 #Inmate HTN Asthma , no PEFR

9/17/2013 7:29 AM Entered By: Brenda McMullen  
 Whetstone 10 charts reviewed 4 charts out of compliance  
 #Inmate Asthma/COPD HTN, no PEFR  
 #Inmate DM HTN, clinical status no marked, Last HgA1C 10/12  
 #Inmate HTN EKG done 8/20/13 not reviewed as of 9/16/13

9/25/2013 12:08 PM Entered By: Trudy Dumkrieger  
 Minors. Only 1 cc chart. d  
 #Inmate dNeeds peak flow and labs.

9/25/2013 12:08 PM Entered By: Trudy Dumkrieger  
 CDU 10 charts reviewed. 3/10 charts not in compliance.  
 #Inmate Needs diagnostic profile and peak flow.  
 #Inmate No peak flow, no labs, no LFTs.  
 #Inmate Needs peak flow.

9/12/2013 12:28 PM Entered By: Trudy Dumkrieger  
 Winchester 10 charts reviewed. 8/10 charts not in compliance.  
 #Inmate needs a filament test.  
 #Inmate Needs A1c, filament, EG, foot exam.  
 #Inmate Needs dilantin level, A1c.  
 #Inmate Needs labs and peak flow.  
 #Inmate Needs a visit, labs, and BP check.  
 #Inmate Needs peak flow, labs, and a serum level.  
 #Inmate Needs a peak flow, diagnostic profile, and HCV protocol initiated.  
 #Inmate Needs peak flow, labs, ekg.

September 2013 TUCSON COMPLEX

				<p>9/10/2013 3:01 PM Entered By: Trudy Dumkrieger            Santa Rita 10 charts reviewed. 6/10 charts not in compliance.            Inmate Needs HCV protocol initiated.            Inmate No peak flow, no diagnostic profile.            Inmate Needs diagnostic profile.            Inmate Needs diagnostic profile            Inmate Needs peak flow            Inmate needs peakflow, diet renewal.</p> <p>9/10/2013 8:34 AM Entered By: Trudy Dumkrieger            Cimarron 10 charts revued 3/10 charts not in compliance.            Inmate No LFTs            Inmate No serum levels for depakote.            Inmate No diagnostic profile in chart.</p> <p>9/10/2013 8:30 AM Entered By: Trudy Dumkrieger            Currently only half the manuel is published.</p> <p>9/17/2013 9:24 AM Entered By: Brenda McMullen            Manzanita 10 charts reviewed 6 charts out of compliance            #Inmate HTN , no current routine labs on chart            #Inmate CA, no clinical status documented            #Inmate DM HTN Cardiac, no clinical status documented            #Inmate HTN, no clinical status documented            #Inmate HTN DM, last labe 7/11/12            #Inmate Asthma HepC+, no PEFR</p> <p>9/17/2013 9:05 AM Entered By: Brenda McMullen            Catalina 10 charts reviewed 7 charts out of compliance            #Inmate Cardiac Asthma no PEFR            #Inmate SZ Asthma HepC+, no PEFR last labs 8/10/12            #Inmate Asthma, HepC+, Hep C not address, no PEFR,            #Inmate SZ Asthma, no PEFR            #Inmate SZ , last labs 11/29/11            #Inmate Asthma SZ HTN CA, no PEFR            #Inmate HTN Asthma , no PEFR</p> <p>9/17/2013 7:29 AM Entered By: Brenda McMullen            Whetstone 10 charts reviewed 4 charts out of compliance            #Inmate Asthma/COPD HTN, no PEFR            #Inmate DM HTN, clinical status no marked, Last HgA1C 10/12            #Inmate HTN EKG done 8/20/13 not reviewed as of 9/16/13            #Inmate DM HTN HCV , labs done 8/30/13 not reviewed as of 9/16/13</p>	
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		9/10/2013 8:34 AM Entered By: Trudy Dumkrieger	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: Trudy Dumkrieger Date: 9/30/2013 2:26:39 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-  
Process statewide to include, but not limited to :

1. Chronic Care inmates seen by provider every 3-6 months, as specified in the treatment plan per Chronic Condition and Disease Management Programs 2.20.2.4 contract performance outcome 2 (I.- IV.Chronic Care Attachment).
2. In-service staff on policy titled "Treatment Plans" Chapter 5, Section 1.4 (Appendix II.2.) and outcome measure .
  - a. Agenda/sign off sheet to verify, inclusive of all pertinent staff .
3. Monitoring
  - a. Audit tools developed.
  - b. Weekly site results discussed with RVP.
  - c. Audit results discussed a monthly CQI meeting.
  - d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties = FHA/DON//Medical Director/RDCQI/RVP

Target Date - 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

**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: Trudy Dumkrieger Date: 9/30/2013 2:26:54 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process for documenting in medical record chronic condition education per Chronic Condition and Disease Management Programs 2.20.2.4 contract performance outcome 3.
2. In-service staff on:
  - a. Documentation of chronic condition education at each visit.
  - b. Agenda/sign off sheet to verify, inclusive of all pertinent staff.
3. Monitoring
  - a. Audit tools developed.
  - b. Weekly site results discussed with RVP.
  - c. Audit results discussed a monthly CQI meeting.
  - d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties = FHA/DON//Medical Director/RDCQI/RVP

Target Date - 11/30/13

Plan weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.10/11/13 Update – Documentation on education sheet located in front of chart, medical records responsible for making sure in chart.

**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: Trudy Dumkrieger Date: 9/30/2013 2:27:10 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

- 1.In-service staff on Corizon Clinical Guidelines (I. – IV. Chronic Care Attachment)
  - a.Agenda/sign off sheet to verify, inclusive of all pertinent staff
- 2.Monitoring

### September 2013 TUCSON COMPLEX

- a. Audit tools developed
- b. Weekly site results discussed with RVP
- c. Audit results discussed a monthly CQI meeting
- d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/Medical Director/RDCQI/RVP

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – Make sure guidelines available at sites; need to prep chart for clinic visit so everything the provider needs is available.

September 2013 TUCSON 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		<p>9/30/2013 1:41 PM Entered By: Marlena Bedoya</p> <p>There are (8) yards at ASP-Tucson. (10) charts were pulled randomly per yard during this audit month, checking to see if the record is current, accurate, chronologically maintained, and documents being in the right location.</p> <p>Of the (80) charts reviewed, (46) did not meet performance measure requirements. The breakdown is listed per yard:</p> <p>SANTA RITA: (06) of (10) charts were non-compliant.</p> <p>Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Loose consult, and HNRs found.                      Inmate [REDACTED] – Mis-filed SNO was found.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Loose refusal, and lab order form found.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Mis-filed Xray request, and SNO found.                      Inmate [REDACTED] – Loose lab request found.                      Inmate [REDACTED] – Loose lab request found. Mis-filed consult request found.                      Inmate [REDACTED] – Compliant.</p> <p>WINCHESTER: (05) of (10) charts non-compliant.</p> <p>Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Loose Rx profile, and un-reviewed lab results. Lab results brought to the attention of the Nursing Supv.                      Inmate [REDACTED] – IM returned to custody 8/14/2013. There is still no permanent chart.                      Inmate [REDACTED] – Misfiled Xray request, and sickcall encounter dtd9/16.                      Inmate [REDACTED] - Loose CC, Rx patient profile, PPD Cocci form, and an IM letter was found dtd 7/25/13.                      Inmate [REDACTED] – Mis-filed SNO, Xray request, Xray result not reviewed. HNRs not filed chronologically. Un-reviewed Xray result brought to the attention of the Nursing Supv.                      Inmate [REDACTED] – Compliant.</p> <p>CIMARRON: (07) of (10) charts non-compliant.</p> <p>Inmate [REDACTED] – Loose CC form, and Rx online profile.                      Inmate [REDACTED] – Mis-filed consult report.                      Inmate [REDACTED] – Loose Provider review form, and HNRs.                      Inmate [REDACTED] – Compliant.                      Inmate [REDACTED] – Mis-filed lab order form.                      Inmate [REDACTED] – Mis-filed Continuity of Care form.                      Inmate [REDACTED] – Compliant.</p>	1

September 2013 TUCSON COMPLEX

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – HNRs not filed  
chronologically.  
Inmate [REDACTED] – HNRs & Refusals not  
filed chronologically.

RINCON MINORS: (3) of (10) charts non-  
compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – All paperwork from  
intake PE dtd 9/05 still loose in chart.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Mis-filed TB  
Symptomology sheet.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Mis-filed  
PPC/Cocci form.

RINCON WEST MEDICAL: (05 of (10)  
charts non-compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Loose Rx profile print out.  
Mis-filed HNRs.  
Inmate [REDACTED] – Loose Rx profile  
print out.  
Inmate [REDACTED] – Loose Rx profile print  
out.  
Inmate [REDACTED] – Violator  
8/10/2013. Still no permanent chart.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – HNRs not filed  
chronologically.  
Inmate [REDACTED] –  
Compliant.

WHETSTONE: (06) of (10) charts were  
non-compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – HNRs not filed  
chronologically.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Loose HNRs, and  
HNRs not filed chronologically.  
Inmate [REDACTED] – Loose HNRs.  
Inmate [REDACTED] – Loose lab  
order request form.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – There was  
no "Physician Orders" tab in chart. HNR not  
filed chronologically.  
Inmate [REDACTED] – IM letter was found  
in the chart dtd 7/24/2013.  
Inmate [REDACTED] – Compliant.

CATALINA: (07) of (10) charts non-  
compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Violator arrived  
5/27/2013. Still no permanent chart.  
Inmate [REDACTED] – Loose Rx profile. HNRs  
not filed chronologically.  
Inmate [REDACTED] – Mis-filed consult  
form, and SNO.  
Inmate [REDACTED] – Violator arrived  
6/14/2013. Still no permanent chart.



September 2013 TUCSON COMPLEX

				<p>Inmate [redacted] – Mis-filed PPD/Cocci form.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – HNRs not filed chronologically.          Inmate [redacted] – Loose Consult report.</p> <p>MANZANITA: (07) of (10) charts non-compliant.</p> <p>Inmate [redacted] – HNRs not filed chronologically. Loose filing, and UPH Rx.          Inmate [redacted] – Mis-filed Problem Summary form, and numerous Rx profile sheets. HNRs not filed chronologically.          Inmate [redacted] – Loose lab results.          Inmate [redacted] – Mis-filed CC forms.          Inmate [redacted] – HNRs not filed chronologically. Mis-filed Rx profile sheet.          Inmate [redacted] – Refusal forms found in HNR section.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – HNR dtd 9/05. Seen 9/06 and was referred to a Provider. Provider saw the IM on 9/06.</p>	
2	<p>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]</p>	X		<p>9/30/2013 2:16 PM Entered By: Marlena Bedoya          There are (8) yards at ASP-Tucson. (10) charts were pulled randomly per yard during this audit month checking to see if Provider orders were noted daily with time, date, and name of person taking the orders off.</p> <p>Of the (80) charts reviewed, (13) did not meet performance measure requirements. The breakdown is listed per yard:</p> <p>SANTA RITA: (02) of (10) charts were non-compliant.</p> <p>Inmate [redacted] – Compliant.          Inmate [redacted] – Orders dtd 8/26. There was a blank fax stamp. No sig, date, time, or noted.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Order noted 9/19, but was not signed or dated by the Provider. (A. Martinez).          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.</p> <p>WINCHESTER: (02) of (10) charts non-compliant.</p> <p>Inmate [redacted] – Order 8/23. Noted 8/26.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Compliant.          Inmate [redacted] – Orders dtd 9/13, not noted yet. Chart filed. Brought to the attention of the Nursing Supv.</p>	1

September 2013 TUCSON COMPLEX

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.

CIMARRON: (02) of (10) charts non-compliant.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Orders dtd 8/07. Noted 8/09.

Inmate [redacted] - Orders dtd 9/19, not noted yet. Chart filed. Brought to the attention of the Nursing Supv.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.

RINCON MINORS: (10) of (10) charts compliant.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.

RINCON WEST MEDICAL: (02) of (10) charts non-compliant.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Order dtd 8/15. Noted 8/17

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Order dtd 8/07 not noted yet. Chart filed. Brought to the attention of the Nursing Supv. (Knee brace).

WHETSTONE: (03) of (10) charts were non-compliant.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Provider didn't date order, and Nurse didn't time when order was taken off.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Provider didn't date or time his order.

Inmate [redacted] - Compliant.  
Inmate [redacted] - Compliant.  
Inmate [redacted] - Orders not noted. Chart filed. Brought to the attention of the Nursing Supv. Also, CC due for IM on 9/02/2013

CATALINA: (10) of (10) charts compliant.

September 2013 TUCSON COMPLEX

				<p>Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.</p> <p>MANZANITA: (02) of (10) charts non-compliant.</p> <p>Inmate [redacted] – Order dtd 8/20. Noted 8/23.                  Inmate [redacted] – Order dtd 8/22. Noted 8/27.</p> <p>Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.                  Inmate [redacted] – Compliant.</p> <p>Although there were findings, this auditor is going to give this performance measure an overall green. Findings will be discussed with the FHA and DON.</p>	
3	<p>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]</p>		X	<p>9/30/2013 3:12 PM Entered By: Marlena Bedoya                  There are (8) yards at ASP-Tucson. (10) charts were pulled randomly per yard during this audit month, checking to see if the Medication Administration Record (MAR) in the medical chart reflects dose, route, frequency, start/stop date, Prescriber, and nurse's signature.</p> <p>Of the (80) charts reviewed, not all had MARS in them. (32) charts had MARS to review and (16) did not meet performance measure requirements. The breakdown is listed per yard:</p> <p>SANTA RITA:                  (02) MARs of (06) within the charts were non-compliant.</p> <p>Inmate [redacted] – There was no Nurse's name as to who took the med orders off, no stop dates on some meds and stop meds on some meds noted. On four of the meds, they were KOP, but no date is noted if the IM was ever given the medications or not.                  Inmate [redacted] – There was no Nurse's name as to who took the med orders off, no start date noted. Med was ordered on 8/19, with missed doses on 8/19-22. This medication is kept in stock for issue until the IMs meds arrive.</p> <p>WINCHESTER:                  (03) MARs of (03) within the charts were non-compliant.</p> <p>Inmate [redacted] – Celexa ordered 8/23.                  There was no documentation IM received</p>	1

## September 2013 TUCSON COMPLEX

his medications. There was no Nurse's name as to who took the med order off and no stop date noted.

**Inmate** – There were two missed doses of Lithium on 8/14 and 8/30.

**Inmate** – There was a MAR for weekly weight checks as ordered by the Provider. The weekly weight checks have never been done. Brought to the attention of the Nursing Supv.

**CIMARRON:**  
(03) MARS of (03) within the charts were non-compliant.

**Inmate** – There were 11 missed doses of Lithium, and 2 doses given after the DC date.

**Inmate** – There were no Nursing sigs or initials on the back of the MAR.

**Inmate** – Carbamazepine 200mg, and Perphenazine 4mg were ordered in July and June respectively. Per the September MAR, the IM got no meds at all.

**RINCON MINORS:**  
(01) MAR of (02) within the charts were non-compliant.

**Inmate** – There was no Nurse's name as to who took the med order off. There was also start/stop date noted.

**RINCON WEST MEDICAL:**  
(03) MARS of (05) within the charts were non-compliant.

**Inmate** – There was a missed dose on the August MAR.

**Inmate** – There was no Nurse's name as to who took the med order off. There was also bold RED ink all over the MAR.

**Inmate** – There was no Stop date noted.

**WHETSTONE:**  
(02) MARS of (03) within the charts were non-compliant.

**Inmate** – There was no Nurse's name as to who took the med order off. No Provider name who ordered the medication. There was an order date, but no start/stop date noted.

**Inmate** – There was no Nurse's name as to who took the med order off. There was an order and start date, but no stop date was noted.

**CATALINA:**  
(01) MARS of (07) within the charts were non-compliant.

**Inmate** – There was no Nurse's name as to who took the med order off. No Provider name who ordered the medication. There was an order date, but no start/stop date noted. Only one Nurse signed the MAR, but it appears a second Nurse administered but did not sign/initial on the back of the MAR.

September 2013 TUCSON COMPLEX

				<p>MANZANITA: (01) MAR was non-compliant of (03) within the charts.</p> <p>Inmate [REDACTED] – There was no Nurse's name as to who took the med order off. There was no stop date noted on the Ibuprofen.</p>	
4	<p>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]</p>	X		<p>9/30/2013 6:12 PM Entered By: Marlana Bedoya There are (8) yards at ASP-Tucson. (10) charts were pulled randomly per yard during this audit month checking to see if record entries were legible, contained time, date, a name stamp of the professional was used, and that the same professional signed the entry.</p> <p>Of the (80) charts reviewed, ( 22 ) did not meet performance measure requirements.</p> <p>The breakdown is listed per yard:</p> <p>SANTA RITA: (06) of (10) charts were non-compliant. One chart had two notes non-compliant.</p> <p>Inmate [REDACTED] – Encounter dtd 8/14 was not legible, and had no stamp or printed name with the sig. (LPN Boswell). Inmate [REDACTED] – Encounter dtd 8/19 had no stamp or printed name with the sig. (LPN Hobbs). Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Encounter dtd 8/19 had no stamp or printed name with the sig. (LPN Hobbs). Inmate [REDACTED] – Encounter dtd 9/10, sig was not legible, and had no stamp or printed name with the sig. (NA Cheeseman). Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Encounter dtd 8/26 had no stamp or printed name with the sig. (LPN Hobbs). Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Encounter dtd 9/18 had no stamp or printed name with the sig. (LPN Hobbs). Encounter dtd 9/20 had no stamp or printed name with the sig. (RN Posko).</p> <p>WINCHESTER: (02) of (10) charts non-compliant.</p> <p>Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Encounter dtd 9/17 had no sig, no stamp, and the note was not finished however, the medications got ordered. Brought to the attention of the Nursing Supv. Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Encounter dtd 9/10 had not stamp or printed name with sig. (RN Pulver). Inmate [REDACTED] – Compliant. Inmate [REDACTED] – Compliant.</p>	1

September 2013 TUCSON COMPLEX

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.

CIMARRON: (05) of (10) charts non-compliant. One chart had two notes non-compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – There was an incomplete note dtd 8/20 from Santa Rita yard.

Inmate [REDACTED] – Encounter dtd 9/04 had no stamp or printed name with sig. (RN Williams).

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Encounter dtd 9/24 had no stamp or printed name with sig. (RN Williams).

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Encounter dtd 9/02 had no stamp or printed name with sig. (LPN Mong). Second encounter dtd 9/02 had no stamp or printed name with sig. (RN Williams).

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Encounter dtd 9/20 had no time noted regarding the encounter. (RN Sweetapple).

RINCON MINORS: (02) of (10) charts non-compliant.

Inmate [REDACTED] – Encounter dtd 8/14, the sig was barely legible and there was no stamp or printed name with sig. (RN Johnston).

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Encounter dtd 9/14 had no stamp or printed name with sig. (RN Johnston).

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.

RINCON WEST MEDICAL: (10) of (10) charts compliant.

WHETSTONE: (10) of (10) charts compliant.

CATALINA: (02) of (10) charts non-compliant.

Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Both (RN Larson) and (Dr. Catsaros) did not use a stamp or print their name with the sig on encounter.  
Inmate [REDACTED] – Encounter dtd 8/22 had no stamp or printed name. There was also no Provider stamp or Nursing stamp or printed names on the Provider Orders page.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.  
Inmate [REDACTED] – Compliant.

September 2013 TUCSON COMPLEX

				<p>MANZANITA: (05) of (10) charts non-compliant.</p> <p>Inmate [REDACTED] – Encounter dtd 9/09 had no stamp or printed name with sig. (RN Seidel).</p> <p>Inmate [REDACTED] – Compliant.</p> <p>Inmate [REDACTED] – Compliant.</p> <p>Inmate [REDACTED] – Encounter dtd 9/13 had no stamp or printed name with sig. (LPN Dawsey).</p> <p>Inmate [REDACTED] – Entries in chart reflects (LPN Gallagher) needs a stamp.</p> <p>Inmate [REDACTED] – Compliant.</p> <p>Inmate [REDACTED] – Entries in chart reflects (LPN Lewusz) needs a stamp.</p> <p>Inmate [REDACTED] – Entries in chart reflects (LPN Gallagher), (LPN Lewusz), and (RN Shuler) need a stamp.</p> <p>Inmate [REDACTED] – Compliant.</p> <p>Inmate [REDACTED] – Compliant.</p> <p>Even though there were findings, this auditor is giving this performance measure an overall finding of GREEN. Findings will be communicated to the FHA and DON.</p>	
5	Are arrival logs maintained and kept current with name of inmate, ADC #, date of arrival, # of volumes?	X		<p>9/28/2013 6:47 AM Entered By: Marlena Bedoya</p> <p>YES. There is one arrival log in Medical Records Administration located in HUB 8. All applicable date re; IM Name, ADC#, Arrival date, and # of volumes is reflected on the log.</p>	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		<p>9/28/2013 6:49 AM Entered By: Marlena Bedoya</p> <p>YES. There is one departure log in Medical Records Administration located in HUB 8 for the entire Complex. All applicable data re; IM Name, ADC#, Departure date, and # of volumes is reflected on the log.</p>	1
7	Are previous (old) volumes filed in a separate location (not with active files) and easily accessible to obtain as needed?	X		<p>9/28/2013 6:51 AM Entered By: Marlena Bedoya</p> <p>YES. All previous old volumes travel to match the IMs physical yard location. On each unit there is a specified location where the old volumes are stored, making retrieval if necessary - easy.</p>	1
8	Are medical records for released inmates pulled from the active file area?		X	<p>9/28/2013 6:56 AM Entered By: Marlena Bedoya</p> <p>Medical records for released inmates are pulled on average 4-6 weeks after the IM is gone. This gives Records staff the ability to file any incoming consult or test results in the chart prior to sending it to archives. On occasion, the IM re-offends therefore; the chart is easily accessible to pull and send as applicable.</p> <p>There is a huge backlog of very old charts (approx 800-1000) boxes throughout the</p>	1



### September 2013 TUCSON COMPLEX

					complex needing to be sent to archives. This backlog goes back several years. A process should be implemented in concert with the Repository in Phoenix to get these records moved.	
9	Are requested archived medical records merged with newly established medical records upon an inmates return to ADC?	X			9/28/2013 6:57 AM Entered By: Marlana Bedoya YES.	1
10	Is a Release of Information log maintained that reflects the Medical Records Requests for 3rd parties (attorney and family requests only)?	X			9/28/2013 6:58 AM Entered By: Marlana Bedoya YES.	1

#### 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: Marlana Bedoya Date: 9/30/2013 1:41:44 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Medical Records will regularly file loose papers and monitor charts for thinning utilizing a reference for medical record chronological order. Continue to monitor

**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: Marlana Bedoya Date: 9/30/2013 3:12:47 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Reinforce with nursing staff the importance of a complete MAR. Continue to monitor

**8 Are medical records for released inmates pulled from the active file area?**

**Level 1 Amber User: Marlana Bedoya Date: 9/28/2013 6:56:53 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Reinforce to MRLs and other health services staff that inmates that were released need to have their medical records pulled from the active files.

**September 2013 TUCSON 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>			9/30/2013 8:15 AM Entered By: Martin Winland	<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>9/30/2013 8:16 AM Entered By: Martin Winland</p> <p>HSTM 4.1.6 Non-Formulary Drug Requests &amp; HSTM 4.1.1 Pharmaceutical Dispensing Procedures –RED- will remain red until documentation that such deficiencies are corrected. Medications must be dispensed and administered in a timely fashion to decrease morbidity, mortality, and maintain continuity of care.</p> <p>A) HSTM 4.1.6 Non –Formulary Drug Requests: Corizon must ensure that requests for necessary non-formulary medications at each Complex Site are received by the inmate in a timely manner. Providers will need to provide formulary medications, if needed, to provide continuity of care while the NFDR is being processed. Documentation of approval or denial is required and if denied, an appropriate therapy is instituted so that the patient will not go without medication during the approval/denial process. September 2013 Non –Formulary Drug Requests – Non Formulary Medication Reports indicate 911 expiring medications (9/03/2013). As of (9-25-2013), the total number of Non-Formulary medications is 578.</p> <p>B) HSTM 4.1.1 Pharmaceutical Dispensing Procedures: Action is required 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 receives continuity of care. September Formulary Report indicates: 6753 formulary medications expiring (9/03/2013). As of (9/25/2013), the total number of Formulary medication needing addressed is 3,569.</p> <p>C) Corizon has initiated a state wide "blitz" in an effort to correct site issues/concerns. Coupled with recent training at the Corizon Regional office, this should positively impact the sites.</p> <p>D) The September 25, 2013 Expiring Medication Report (Formulary and Non Formulary ) was sent to Christy Somner(State D.O.N. ,Corizon) for follow up with the facilities.</p> <p>Tucson continues to work on Corizon policy and procedure. I continue to alert the facility on medication issues/concerns. As with the other facilities, Corizon will "blitz" Tucson as well. This coupled with recent education at Corizon's office for site staff should prove beneficial. (9-25-2013) Formulary 628, Non Formulary 91.</p>	<b>2</b>

**September 2013 TUCSON COMPLEX**

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			9/30/2013 8:17 AM Entered By: Martin Winland	1
4	When a medication error occurs, is nursing staff completing a medication error report, documenting per policy and notifying Nursing Supervisor, Facility Health Administrator, who will notify all other Program Managers and ADC On-site Monitor? [HSTM Chapter 5, Section 6.6]		X		9/30/2013 8:17 AM Entered By: Martin Winland See Medication Administration MGAR question #11	2
5	Are the dosages of medication being changed, increased or decreased contrary to time frames stated in appropriate clinical compendia, such as Drug Facts and Comparisons and/or the package insert, unless the need is clinically documented in the chart and a non-formulary request is approved?	X			9/30/2013 8:17 AM Entered By: Martin Winland	1

**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 Red User: Martin Winland Date: 9/30/2013 8:16:53 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process statewide, to include but not limited to (Pharmacy Appendix 1 & 2):

- a. Expired Medications (Appendix I.1.a.)
- b. Re-order medications
- c. Invalid chart orders (Appendix I.1.c.)
  - i. Therapeutic dose ranges
  - ii. Dose changes must have supporting documentation
- d. Non-formulary process (Appendix I.1.d.)
  - i. Reviewed for approval within 24-48 hrs
  - ii. Providers notified decision within 24-48 hrs
- e. Manifest Reconciliation
- f. Inventory control
- g. Stock Medications
- h. Practitioner Cards (Appendix I.1.h.)
- i. Controlled Medications (Appendix I.1.i.)

2. In-service staff

- a. Using information from 8/19 - 11/13 Regional office mandatory in-service and PharmaCorr policy
- b. Agenda/sign off sheet to verify, inclusive of all pertinent staff (Appendix I.2.b.)

3. Monitoring (Appendix I. - IV Monitoring Tools)

- a. Audit tools developed
- b. Weekly site results discussed with RVP
- c. Audit results discussed a monthly CQI meeting
- d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/IC/RDCQI/RVP

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – Statewide in Sept Redbook and MAR audit, results reviewed; to audit pharmacy in October related to Controlled Substances and Expired meds.

**4 When a medication error occurs, is nursing staff completing a medication error report, documenting per policy and notifying Nursing Supervisor, Facility Health Administrator, who will notify all other Program**

## September 2013 TUCSON COMPLEX

**Managers and ADC On-site Monitor? [HSTM Chapter 5, Section 6.6]**  
**Level 2 Amber User: Martin Winland Date: 9/30/2013 8:17:48 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process statewide to include, but not limited to :
  - a. Medication error documentation/reporting (Pharmacy Appendix).
2. In-service staff on process and PharmaCorr policy.
  - a. Agenda/sign off sheet to verify, inclusive of all pertinent staff.
3. Monitoring (Appendix I. - IV Monitoring Tools)
  - a. Audit tools developed.
  - b. Weekly site results discussed with RVP.
  - c. Audit results discussed a monthly CQI meeting.
  - d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties =FHA/DON/RDCQI/RVP/FHA

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

September 2013 TUCSON 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			9/30/2013 2:39 PM Entered By: Nicole Taylor *Out of 90 charts pulled, 87 were in compliance = 96% Catalina (10 out of 10 in compliance): No findings. Manzanita (10 out of 10 in compliance): No findings. Whetstone (9 out of 10 in compliance): <b>Inmate</b> (SMI): (+2 days before triaged). Minors (10 out of 10 in compliance): No findings. CDU (9 out of 10 in compliance): <b>Inmate</b> (HNR dated 8/1/13 was never triaged). Rincon (10 out of 10 in compliance): No findings. Santa Rita (10 out of 10 in compliance): No findings. Cimarron (10 out of 10 in compliance): No findings. Winchester (9 out of 10 in compliance): <b>Inmate</b> (+2 days before triaged).	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	9/30/2013 2:43 PM Entered By: Nicole Taylor *Out of 90 charts pulled, 75 were in compliance = 83%. This performance measure is receiving a Red finding due to the nature of the referrals, the type of inmates (SMI), and their housing locations (CDU). Also, many of the referrals are from June and July. There is potential for serious harm to the inmate. Catalina (9 out of 10 in compliance): <b>Inmate</b> Inmate was referred 8/23/13 and still has not been seen. Manzanita (8 out of 10 in compliance): * <b>Inmate</b> (SMI): Inmate was referred 8/30/13 and still has not been seen. Please note that inmate's meds were set to expire on 9/13/13 due to a med bridge order being completed on 6/13/13. <b>Inmate</b> (SMI): Inmate was referred in a SOAP note per IM's request on 7/11/13 and inmate has not yet been seen. Whetstone: (9 out of 10 in compliance): <b>Inmate</b> (SMI): Inmate was referred 7/2/13 & 7/25/13 by psych nurse. Inmate has not yet been seen. Minors: (9 out of 10 in compliance): <b>Inmate</b> (That literally is the ADC number on that chart): Inmate was referred 8/19/13 in a SOAP note and the inmate has not yet been seen. CDU: (6 out of 10 in compliance): This standing alone would be a red finding. <b>Inmate</b> (SMI): Inmate was referred 8/30/13 & 7/9/13—Inmate has not yet been seen. <b>Inmate</b> Inmate was referred 8/1/13 & 8/9/13 and not seen until 8/14/13. <b>Inmate</b> Inmate was referred 8/12/13 and has not yet been seen. <b>Inmate</b> Inmate was referred on 7/25/13 in a chart review and in watch notes on 6/18/13 & 6/20/13... however inmate has not yet been seen. Note: inmate was on watch for S.I. and voices telling him to self-harm.	2

September 2013 TUCSON COMPLEX

					<p>Rincon: (9 out of 10 in compliance):  <b>Inmate</b> Inmate referred 6/14/13 and not seen until 8/29/13.                  Santa Rita: (8 out of 10 in compliance):  <b>Inmate</b> (SMI): Inmate was referred 6/20/13 in an HNR and on 7/11/13 in a note. Inmate was not seen until 8/29/13.  <b>Inmate</b> Inmate was referred on 6/6/13 in an HNR and on 6/3/13 in a chart review... Inmate was not seen until 8/6/13.                  Cimarron: (9 out of 10 in compliance):  <b>Inmate</b> Inmate was referred 7/23/13 and 8/1/13 and not seen until 8/14/13.                  Winchester: (8 out of 10 in compliance):  <b>Inmate</b> Inmate was referred 8/24/13 and has not yet been seen.  <b>Inmate</b> Inmate was referred 8/9/13 in an HNR and has not yet been seen.</p>	
3	<p>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]</p>			X	<p>9/30/2013 2:46 PM Entered By: Nicole Taylor                  *Out of 90 charts pulled, 70 were in compliance = 77%. This performance measure is receiving a Red finding because the charts out of compliance, all but one were either SMI inmates or they simply did not have a treatment plan at all (not just needing an update).                  The following inmates need treatment plans or treatment plan updates. Please note: occasionally the clinician assigned to the unit updated the treatment plan at the time of the finding.                  Catalina: (8 out of 10 in compliance):  <b>Inmate</b> (SMI), <b>Inmate</b> (SMI).                  Manzanita: (9 out of 10 in compliance):  <b>Inmate</b> (No tx plan found in chart).                  Wneistone: (9 out of 10 in compliance):  <b>Inmate</b> (SMI)                  Minors: (6 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> <b>Inmate</b> <b>Inmate</b> <b>Inmate</b> (All of these chart did not have a treatment plan).                  CDU: (8 out of 10 in compliance):  <b>Inmate</b> <b>Inmate</b> (Both charts did not have a treatment plan).                  Rincon: (8 out of 10 in compliance):  <b>Inmate</b> (needs update), <b>Inmate</b> (no treatment plan found).                  Santa Rita: (8 out of 10 in compliance):  <b>Inmate</b> &amp; <b>Inmate</b> Both did not have treatment plans in their charts.                  Cimarron: (7 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI &amp; needs treatment plan update), <b>Inmate</b> &amp; <b>Inmate</b> (both did not have tx plans).                  Winchester: (7 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI) &amp; <b>Inmate</b> (SMI): both need tx plan updates, <b>Inmate</b> did not locate a tx plan in chart.</p>	1
4	<p>Are inmates with a mental score of MH-3 and above seen by MH staff according to policy? [CC 2.20.2.10]</p>			X	<p>9/30/2013 2:49 PM Entered By: Nicole Taylor                  *Out of 90 charts pulled, 70 were in compliance = 77%. This performance measure is receiving a Red finding because most of the inmates who had not been seen</p>	2



September 2013 TUCSON COMPLEX

					<p>were SMI inmates. This poses a potential risk of serious harm to an inmate.          The following inmates are past due for their psychology visit:          Catalina: (9 out of 10 in compliance):          Inmate(SMI)          Manzanita: (5 out of 10 in compliance): This standing alone would be a red finding.          Inmate(SMI), Inmate Inmate(SMI), Inmate Inmate          Whetstone: (10 out of 10 in compliance):          No findings.          Minors: (9 out of 10 in compliance):          Inmate          CDU: (9 out of 10 in compliance):          Inmate          Rincon: (7 out of 10 in compliance): This standing alone would be a red finding.          Inmate(SMI), Inmate(SMI), Inmate(SMI).          Santa Rita: (9 out of 10 in compliance):          Inmate          Cimarron: (6 out of 10 in compliance): This standing alone would be a red finding.          Inmate(SMI), Inmate Inmate(SMI), Inmate          Winchester: (6 out of 10 in compliance):          This standing alone would be a red finding.          Inmate(SMI), Inmate(SMI), Inmate(SMI), Inmate(SMI).</p>	
5	<p>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]</p>			X	<p>9/30/2013 2:54 PM Entered By: Nicole Taylor          *Out of 90 charts pulled, 65 were in compliance = 72%. This performance measure is receiving a Red finding because of the low compliance and there were many SMI inmates that had not been seen by their Return to Clinic date. Some of the dates were from as early as last March and still had not been seen. This poses a potential risk of serious harm to the inmate. The following inmates are past due for their psychiatry visit or past their Return to Clinic date:          Catalina: (6 out of 10 in compliance): This standing alone would be a red finding.          Inmate(SMI): Past due for psychiatry visit-RTC was 4/21/13.          Inmate(SMI): Past due for psychiatry visit-RTC was 8/28/13.          Inmate(SMI): Past due for psychiatry visit-RTC was 6/26/13.          Inmate Past due for psychiatry visit- RTC was 7/23/13.          Manzanita: (8 out of 10 in compliance):          Inmate(SMI): Past due for psychiatry visit-RTC was 4/7/13. (This inmate's meds possibly expired on 9/13/13 as there was only a 90-day bridge order completed on 6/13/13).          Inmate Past due for psychiatry visit- RTC date was 3/18/13. (This inmate's meds possibly expired on 9/13/13 as there was only a 90-day bridge order completed on 6/13/13).          Whetstone: (9 out of 10 in compliance):          Inmate(SMI): Past due for psychiatry visit-RTC was 8/23/13.          Minors: (9 out of 10 in compliance):          Inmate (ADC # per chart): Past due for psychiatry visit- RTC was 8/21/13.          CDU: (7 out of 10 in compliance): This</p>	2



September 2013 TUCSON COMPLEX

				<p>standing alone would be a red finding.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 7/11/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 8/3/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 9/10/13.  Rincon: (7 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 7/11/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 8/15/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 7/24/13.  Santa Rita: (7 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 8/9/13.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 9/7/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 7/7/13.  Cimarron: (5 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 9/6/13.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 4/11/13.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 10/12/11.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 3/1/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 7/4/13.  Winchester: (7 out of 10 in compliance): This standing alone would be a red finding.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 8/20/13.  <b>Inmate</b> (SMI): Past due for psychiatry visit- RTC was 8/29/13.  <b>Inmate</b> Past due for psychiatry visit- RTC was 8/26/13.</p>	
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>9/30/2013 2:57 PM Entered By: Nicole Taylor  *Out of 90 charts pulled, 87 were in compliance = 96%  Catalina: (10 out of 10 in compliance): No findings.  Manzanita: (10 out of 10 in compliance): No findings.  Whetstone: (10 out of 10 in compliance): No findings.  Minors: (10 out of 10 in compliance): No findings.  CDU: (10 out of 10 in compliance): No findings.  Rincon: (10 out of 10 in compliance): No findings.  Santa Rita: (9 out of 10 in compliance):  <b>Inmate</b> No release planning notes found in chart.  Cimarron: (8 out of 10 in compliance):  <b>Inmate</b> &amp; <b>Inmate</b> No release planning notes found in chart.  Winchester: (10 out of 10 in compliance): No findings.</p>	2

## September 2013 TUCSON 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 Red User: Nicole Taylor Date: 9/30/2013 2:43:39 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. In-service staff on process expectations per Mental Health 2.20.2.10 contract performance outcome 2 (Mental Health Attachment) related to psychiatric providers seeing HNR or sick call referrals within 7 days

a. HNR triaged by medical; seen at medical nurse line, referred to psychiatric providers within 7 days, when appropriate

b. Agenda/sign off sheet to verify, inclusive of all pertinent staff

c. Have MH staff increase their contacts if appointment cannot be made in 7 days

2. Monitoring (Mental Health Monitoring Tool)

a. Audit tools developed

b. Weekly site results discussed with RVP/MH Director

c. Audit results discussed at monthly CQI meeting

d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/Mental Health Director/RVP/RDON/RDCQI/MH Lead

Target Date -11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – Educator and Dr. Shaw training all RNs on basic mental health and medical assessment; Eyman completed.

**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 Red User: Nicole Taylor Date: 9/30/2013 2:46:27 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. In-service staff on process expectations per Mental Health 2.20.2.10 contract performance outcome 3 (Mental Health Attachment) related to treatment plan updates every 90 days and use of SMI monthly report tool

a. SMI monthly report tool will be maintained by the MH Clinicians to assist with tracking appointments; copy given to MH Leader monthly and submitted to MH Directly monthly to track and trend (III.1.a. SMI Monthly Report)

b. Review AIMS and update when changes in MH status

c. Inmates with mental health score of three or above are seen by MH staff per policy titled "Levels of Mental Health Services Delivery" (Appendix III.1.c.)

d. Agenda/sign off sheet to verify, inclusive of all pertinent staff

2. Monitoring (Mental Health Monitoring Tool)

a. Audit tools developed

b. Monthly site results discussed with RVP/MH Director

c. Audit results discussed at monthly CQI meeting

d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/Mental Health Director/RVP/RDON/RDCQI/MH Lead

Target Date- 11/30/13

Continue to monitor daily, then monthly until meet compliance, then ongoing monthly monitoring.

10/11/13 Update: Staff in-serviced on how to use SMI monthly report tool; review of audit tool data to begin in November.

**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 Red User: Nicole Taylor Date: 9/30/2013 2:49:31 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Mental Health staff to receive education the importance of MH-3 inmates being seen according to policy.

## September 2013 TUCSON COMPLEX

2. Reinforce this in monthly staff meetings.  
3. Continue to perform chart reviews to ensure inmates with an MH-3 score and above are being seen by Mental Health staff per policy.  
4. Review treatment plans to ensuring that the IMs current MH score, according to the recognized system, is captured within the current treatment plan.  
Responsible Parties = MH Lead/RN/FHA/DON/MH Director/RCQI  
Target Date-11/30/13

**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 Red User: Nicole Taylor Date: 9/30/2013 2:54:02 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Monitoring (Mental Health Monitoring Tool)
  - a. Audit tools developed
  - b. Monthly site results discussed with RVP/MH Director
  - c. Audit results discussed at monthly CQI meeting
  - d. Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = RDCQI/RVP/MH Director/FHA/DON/MH Lead

Target Date- 11/30/13

Continue to monitor monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

September 2013 TUCSON COMPLEX

No Shows						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are No-Shows being brought to health unit to sign a refusal? [DO 1101, HSTM Chapter 5, Section 7.1]		X		<p>9/30/2013 12:00 PM Entered By: Marlena Bedoya</p> <p>There are (8) yards at ASP-Tucson. (7 - 10) charts were pulled randomly per yard during this audit month from sick call signature lists for any IMs that was marked as "No Show". If there were no - "no shows", charts were pulled that indicated "Refused", "Rescheduled", "Seen", and "Unable to sign" to see if in fact there was appropriate documentation in the chart, or to see if the IM had in fact been rescheduled, and was seen appropriately as indicated. It is evident by the findings, that staff need to be re-trained by an in-service on this topic.</p> <p>Of the (65) charts reviewed, (54) did not show appropriate documentation within the charts to meet performance measure requirements.</p> <p>The breakdown is listed per yard:</p> <p>SANTA RITA: There were no IMs marked as "No Show" during the entire audit range. (07) charts were checked having been marked as "Refused". (03) charts were checked having been marked as "Rescheduled".</p> <p>Within the (10) charts checked (07) were non-compliant.</p> <p>Inmate ██████████ – Marked as rescheduled. Compliant – seen 8/26.                      Inmate ██████████ – Marked as rescheduled. Compliant – seen 8/26.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, but a refusal was found.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, but a refusal was found.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, but a refusal was found.                      Inmate ██████████ – Marked as refused on 9/11. Non-compliant. IM was in fact seen on 9/11, with an Urgent consult to Ophthalmology having been written for post cataract surgery complications. IMs chart brought to the attention of the unit Nursing Manager.                      Inmate ██████████ – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.                      Inmate ██████████ – Marked as rescheduled. Compliant – seen 9/20.</p> <p>WINCHESTER: There were (04) IMs marked as "No Show" during the entire audit range. (04) charts were checked</p>	1

September 2013 TUCSON COMPLEX

having been marked as "Refused". (02) charts were checked having been marked as "Rescheduled".

Within the (10) charts checked (06) were non-compliant.

**Inmate** [REDACTED] – Marked as No Show. Non-compliant. Refusal found in chart signed by two Nurses (Otto & Anderson) vs. the IM being found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] - Marked as No Show. Non-compliant. Refusal found in chart signed by two Nurses (Otto & Anderson) vs. the IM being found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] – Marked as No Show. Non-compliant. Refusal found in chart signed by two Nurses (Otto & Anderson) vs. the IM being found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] – Marked as No Show. Non-compliant. Refusal found in chart signed by two Nurses (Otto & Anderson) vs. the IM being found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.

**Inmate** [REDACTED] – Marked as refused. Compliant. Both a note, and a refusal that was completely filled out was found.

**Inmate** [REDACTED] - Marked as refused. Compliant. Both a note, and a refusal that was completely filled out was found.

**Inmate** [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.

**Inmate** [REDACTED] – Marked as refused. Compliant. Both a note, and a refusal that was completely filled out was found.

**Inmate** [REDACTED] – Marked as rescheduled. IM was rescheduled.

CIMARRON: There were (02) IMs marked as "No Show" during the entire audit range. (05) charts were checked having been marked as "Refused". (03) charts were checked having been marked as "Rescheduled".

Within the (10) charts checked (08) were non-compliant.

**Inmate** [REDACTED] – Marked as No Show. Non-compliant. No note or Refusal found in chart showing the IM had been found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] - Marked as No Show. Non-compliant. No note or Refusal found in chart showing the IM had been found and brought to medical to sign a refusal. IMs chart brought to the attention of the unit Nursing Manager.

**Inmate** [REDACTED] – Marked as refused. Non-compliant. Note was in chart, but no refusal

September 2013 TUCSON COMPLEX

was found.  
Inmate [REDACTED] – Marked as refused. Non-compliant. There was a notation on the CC form, but no refusal was found.  
Inmate [REDACTED] – Marked as refused. Non-Compliant. There was a note, but no refusal was found.  
Inmate [REDACTED] - Marked as refused. Non-Compliant. There was no note, or refusal found in chart. LPN Mong did make a notation on the HNR.  
Inmate [REDACTED] – Marked as refused. Non-compliant. No note, but a refusal was found.  
Inmate [REDACTED] – Marked as rescheduled from 9/19. Non-compliant. As of 9/25 IM had not been seen yet.  
Inmate [REDACTED] – Marked as rescheduled. Compliant. IM seen 9/20.  
Inmate [REDACTED] - Marked as rescheduled. Compliant. IM seen 9/20.  
  
RINCON MINORS: Due to the lack of documentation regarding daily lines. No IMs were found as having been marked No Show, Refused, or Rescheduled.  
  
RINCON WEST MEDICAL: There were no IMs marked as "No Show" during the entire audit range. (06) charts were checked having been marked as "Refused". (04) charts were checked having been marked as "Rescheduled".  
  
Within the (10) charts checked (09) were non-compliant.  
Inmate [REDACTED] – Marked as rescheduled. Non-Compliant. Not rescheduled. Brought to the attention of the Nursing Supv.  
Inmate [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.  
Inmate [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.  
Inmate [REDACTED] - Marked as refused. Non-compliant. No note or refusal was found in chart. Brought to the attention of the Nursing Supv.  
Inmate [REDACTED] – Marked as rescheduled. Compliant. IM seen 9/10.  
Inmate [REDACTED] -- Marked as rescheduled. Non-Compliant. Not rescheduled. Brought to the attention of the Nursing Supv.  
Inmate [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.  
Inmate [REDACTED] – Marked as refused. Non-compliant. No note was in chart, a refusal was found, but the form was incompletely filled out.  
Inmate [REDACTED] – Marked as rescheduled, but IM found in book and marked off as seen for 9/05. Non-compliant. IM not seen or rescheduled. Brought to the attention of the Nursing Supv.  
Inmate [REDACTED] - Marked as refused. Non-compliant. No note was in chart, a refusal was found.

## September 2013 TUCSON COMPLEX

					<p>WHETSTONE: There were no IMs marked as "No Show" during the entire audit range. Only (08) charts were checked having been marked as "Refused".</p> <p>Within the (08) charts checked (07) were non-compliant.</p> <p><u>Inmate</u> [REDACTED] – Non-compliant. An extended search was made and chart could not be located. IM showed on yard's Alpha Roster and AIMS as being housed there.</p> <p><u>Inmate</u> [REDACTED] – Marked as refused. Non-compliant. No note or refusal was found.</p> <p><u>Inmate</u> [REDACTED] – Marked as refused. Non-compliant. Note was in chart, but no refusal was found.</p> <p><u>Inmate</u> [REDACTED] – Marked as refused. Compliant. Note and refusal was</p>	
2	Are unresolved No-Shows being reported to the unit deputy warden for a written response? [DO 1101]		X		<p>9/30/2013 12:08 PM Entered By: Marlana Bedoya</p> <p>Of the (06) IMs recorded as No Shows being; (04) at Winchester, and (02) at Cimarron, there was no documentation located that the information was reported to the Unit Deputy Warden for a written response.</p>	1
3	Are providers being notified of medication line No-Shows? [DO 1101, HSTM Chapter 5, Section 7.1]	X			<p>9/30/2013 12:09 PM Entered By: Marlana Bedoya</p> <p>YES. If an IM has (3) consecutive no shows on medication lines, the IMs chart is placed for review with the Provider for appropriate action.</p>	1
4	Are No-Shows being rescheduled if medically indicated? [DO 1101, HSTM Chapter 5, Section 7.1]	X			<p>9/29/2013 2:29 PM Entered By: Marlana Bedoya</p> <p>YES.</p>	1

### Corrective Action Plans for Performance Measure: No Shows

#### 1 Are No-Shows being brought to health unit to sign a refusal?

[DO 1101, HSTM Chapter 5, Section 7.1]

Level 1 Amber User: Marlana Bedoya Date: 9/30/2013 12:00:42 PM

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Reinforce with staff to complete a refusal form to be signed by inmate. Continue to monitor.

Responsible Parties= RN/LPN

Target Date = 11/30/13

#### 2 Are unresolved No-Shows being reported to the unit deputy warden for a written response? [DO 1101]

Level 1 Amber User: Marlana Bedoya Date: 9/30/2013 12:08:35 PM

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Reinforce to staff that list to be provided to DW of those inmates that are no-shows (per policy).



September 2013 TUCSON COMPLEX

Infection Control						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Does the facility have a written exposure control plan? [NCCHC Standard P-B-01]	X			9/12/2013 12:30 PM Entered By: Trudy Dumkrieger	1
2	Is the health unit in compliance with NCCHC Standard P-B-01 compliance indicators?	X			9/30/2013 3:42 PM Entered By: Trudy Dumkrieger	1
3	Are standard precautions used by health care practitioners? [NCCHC Standard P-B-01]	X			9/23/2013 12:11 PM Entered By: Trudy Dumkrieger	1
4	Are precautionary instructions given to security when necessary (to include transportation staff)? [NCCHC Standard P-B-01]	X			9/23/2013 12:11 PM Entered By: Trudy Dumkrieger	1
5	Are Sanitation workers trained in appropriate methods for handling and disposing of biohazard spills and materials? [NCCHC Standard P-B-01]	X			9/23/2013 12:25 PM Entered By: Trudy Dumkrieger Sanitation workers are not allowed to handle or clean up biohazard spills or materials. Security staff are trained to do that.	1
6	Are active TB patients transported to hospitals with negative pressure rooms? [NCCHC Standard P-B-01]	X			9/12/2013 12:30 PM Entered By: Trudy Dumkrieger	2
7	Does the facility assure that inmates released with infectious or communicable diseases are provided with community referrals and for transfer inmates, notify the receiving facility of the medical condition? [NCCHC Standard P-B-01]	X			9/30/2013 2:17 PM Entered By: Trudy Dumkrieger IM [Inmate ██████████]. He was housed at Manzanita Det. He is a newly diagnosed HIV as of 6/18/13. There is a note to the effect that he was diagnosed at the county jail but I can't find any kind of a COC or anything from the county regarding this. Corizon did the initial blood work on the above date and the IM was seen by a NP on 8/8 and explained what the lab results were and the plan to draw more blood. He had that done in Aug. but it was not printed and put in his chart. He got moved from Stiner to Winchester Det. to Manz. Det. and released on Sunday. Nothing has been done from the time the blood was drawn till he got out. Brought to Corizons attention.  9/13/2013 2:43 PM Entered By: Trudy Dumkrieger	1
8	Are facilities using effective ectoparasite control procedures to treat infected inmates and to disinfect clothing and bedding? [NCCHC	X			9/25/2013 12:10 PM Entered By: Trudy Dumkrieger	1

September 2013 TUCSON COMPLEX

	Standard P-B-01]					
9	Does the prescribed treatment given to inmates consider conditions such as pregnancy, open sores, or rashes and is ordered only by a clinician? [NCCHC Standard P-B-01]	X			9/25/2013 12:10 PM Entered By: Trudy Dumkrieger	1
10	Does the facility complete and file all reports as required by local, state, and federal laws and regulations and reports to local health departments? [NCCHC Standard P-B-01]	X			9/13/2013 2:42 PM Entered By: Trudy Dumkrieger	1
11	Does the facility follow a TB plan consistent with CDC guidelines and conduct PPD tests and chest x-rays per policy with annual PPD check-up? [NCCHC Standard P-B-01]	X			<p>9/30/2013 3:35 PM Entered By: Trudy Dumkrieger</p> <p>9/30/2013 3:34 PM Entered By: Trudy Dumkrieger Rincon 10 charts reviewed 1/10 charts not compliant. Inmate +PPD needs S+S check.</p> <p>9/30/2013 3:28 PM Entered By: Trudy Dumkrieger IPC/HU9 10 charts reviewed 3/10 charts not in compliance. Inmate +PPD last S+S check 7/11. Inmate + PPD no signs and symptoms check on chart. Inmate +PPD last S+S check 6/11.</p> <p>9/25/2013 12:14 PM Entered By: Trudy Dumkrieger Minors/CDU Combined 10 charts reviewed.2/10 charts not in compliance. Inmate Tagged and documented as having a positive HX. Documented he was TX with INH. Retested 4/16/13 in county jail was neg. No S+S check. Referred to provider for decision. Inmate HX of +PPD. Last S+S check 3/8/12. Referred to nurse.</p> <p>9/11/2013 3:09 PM Entered By: Trudy Dumkrieger Winchester 10 charts reviewed. 2/10 charts out of compliance. Inmate needs a signs and symptoms check. Inmate needs a signs and symptoms check.</p> <p>9/10/2013 12:50 PM Entered By: Trudy Dumkrieger Santa Rita 10 charts reviewed all ten in compliance.</p> <p>9/10/2013 11:07 AM Entered By: Trudy Dumkrieger Cimarron 10 charts checked 3/10 charts not in compliance. Inmate needs signs and symptoms check. Inmate needs a signs and symptoms check. Inmate Needs a signs and symptoms check.</p> <p>9/10/2013 11:04 AM Entered By: Trudy Dumkrieger Yes, with the exception that there is a shortage of Tuberisol so TB testing has</p>	1

### September 2013 TUCSON COMPLEX

		X			been temporarily suspended.	1
12	Has the facility developed a needle-stick prevention program? [NCCHC Standard P-B-01]	X			9/13/2013 2:44 PM Entered By: Trudy Dumkrieger	1
13	Is there a designated Infection Control liaison ? [NCCHC Standard P-B-01]	X			9/12/2013 12:31 PM Entered By: Trudy Dumkrieger	1
14	Are red bags being handled and stored appropriately? [NCCHC Standard P-B-01]	X			9/30/2013 3:44 PM Entered By: Trudy Dumkrieger	1
15	Are dirty sharps maintained in a double locked area? [NCCHC Standard P-B-01]	X			9/30/2013 3:43 PM Entered By: Trudy Dumkrieger On all but one yard yes. That yard they are behind a single locked area. Corizon made aware and are correcting it.	1

September 2013 TUCSON COMPLEX

Medication Administration						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Is there a formal medication administration program? [NCCHC Standard P-C-05]	X			9/11/2013 2:40 PM Entered By: Trudy Dumkrieger	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			9/5/2013 1:51 PM Entered By: Trudy Dumkrieger	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			<p>9/5/2013 1:52 PM Entered By: Trudy Dumkrieger</p> <p>9/20/2013 8:04 AM Entered By: Brenda McMullen Catalina inmates sign KOP MAR Whetstone, Manzanita Nursing signing KOP MARS</p> <p>9/17/2013 8:31 AM Entered By: Brenda McMullen Catalina, Inmates sign the KOP MAR</p> <p>9/17/2013 7:30 AM Entered By: Brenda McMullen Whetstone, Nursing signs Mars for KOP medications.</p>	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>9/30/2013 2:31 PM Entered By: Trudy Dumkrieger Amber</p> <p>9/30/2013 12:18 PM Entered By: Trudy Dumkrieger IPC/HU9 MARS 10 MARS reviewed 10/10 not in compliance. <b>Inmate</b> pg 1 No start dates, no DX, prozac and prenatal vit not signed off 9/17.Pg.2 Order to substitute ensure for jevity no providers name, no start/stop daye.Pg.3 no stop dates no transcribers initials.</p> <p><b>Inmate</b> Pg.1 no transcribers initials on one med, no stop date for same med.Pg.2 metoprolol not signed off 9/17, colace not signed off 9/17. Pg 3 R triple lumen flush no order date, start date. Senna not given 9/4-9/9. No start date for senna or thiamine. Pg. 4 no transcribers initials for Tylenol or lasix. No start date for lasix, lasix not signed off 9/7. Pg.5 Ondansetron no transcribers initials, no providers name, no order date, no start/stop date. Has note "copied mid transcription per request" written on it.</p> <p><b>Inmate</b> Pg.1 No transcribers initials on Oxycodone HCL no start date. KCL and lasix, start date 9/17/13 not given until 9/18. Pg.2 no transcribers initials lasix 80 mg po daily or lasix 60 mg po x1. No providers name on 60 mg order, no order date.Pg.3 Meds reordered 9/17 with a start date 9/17 not given until 9/18 or 9/19.</p>	1

September 2013 TUCSON COMPLEX

**Inmate** Pg.1 no transcribers initials on 5 meds. Pg.2 ASA not signed for 9/16, 9/17, 9/21. Docusate not signed for 9/7, or 9/16, finasteride expired 9/15 not signed off 9/1-9/15. No DX. Pg.3 No transcribers initials, no DX, Carvedilol no start/stop date. Pg.4 No transcribers initials on meds, no start date, no diagnosis. Pg.5 No DX, Cipro no providers name, no stop date. Pg. 6 OK.

**Inmate** Pg.1 No transcribers initials, no DX, meds start date 9/24 no given no explanation. Pg.2 Do not need to put DC orders on MARS KCL and lasix no transcribers initials, no start dates. Pg.3 No transcribers initials on 5 meds, no stop date on prednisone .

**Inmate** No stop dates for Qvar or Albuterol.

**Inmate** Pg.1 No transcribers initials, no DX, lasix not given 9/21, 3 doses of rifaximin not signed out, spironolactone not signed out 9/21. Pg.2 No transcribers initials on 2 meds, no DX, cylexa, lasix and lactulose not signed as given 9/4/13 no explanation. Lactulose also not signed for 9/14 PM dose.

**Inmate** Pg.1 No DX, Keppra not signed out 9/14/13. Metoprolol not signed out 9/14, Potassium 9/11/13 not signed as given, warfarin not signed as given 9/6, 9/7, 9/14.. Pg. 2 No DX, ASA not signed as given 9/6, 9/7, 9/14. Calcium not signed off same days, ferrous sulfate, lasix, HCTZ same thing.

**Inmate** No transcribers initials on Keflex or IBU. Ensure not signed as given 9/10, 9/16, 9/18.

**Inmate** Pg.1 No transcribers initials on 4 meds, no providers name on two meds, no start/stop date on lactulose. Pg.2 no transcribers initials on 3 meds, PICC line flush not initialed on 1 date. Pg. 3 No stop date on 4 meds, Pg. 4 no transcribers initial on one med, no start/stop date.

9/30/2013 10:00 AM Entered By: Trudy Dumkrieger  
Rincon 10 MARS reviewed 6/10 MARS non in compliance.

**Inmate** No start/stop date, no transcribers initials, no DX.

**Inmate** No stop date, no DX.

**Inmate** No transcribers initials, no start/stop date, no DOB, no allergies, no DX.

**Inmate** Medicaton not signed off for PM 9/23/13, not signed off all day 9/24/13 or AM on the 25th.

**Inmate** PG 1 No transcriberas initials, no DX, for allergies "multiple" was written. Pg 2 No start date, no allergies, no DOB. Pg. 3 No transcribers initials, no stop date, no DX, no allergies.

**Inmate** Doxazosin not signed off 9/10/13, B-Complex not signed off 9/14, dilantin not signed off 9/14, no DX.

September 2013 TUCSON COMPLEX

9/25/2013 12:59 PM Entered By: Trudy Dumkrieger  
9/20/2013 7:49 AM Entered By: Brenda McMullen  
Manzanita Mars  
10 Mars reviewed 10 Mars out of compliance  
#Inmate no dx, no start date, not checked by nursing staff  
#Inmate no dx, no month, no year, no order date, no start date, no transcriber  
#Inmate not checked by nursing, no dx, no start date  
#Inmate no dx, no start date, Benzoyl Peroxide not given 9/1-16/13 not given no explanation.  
#Inmate no prescriber, no transcriber, no start date, no month, no year, no dx, no allergy, no start date  
#Inmate no dx, no start date  
#Inmate month, no year, no prescriber, no stop date, no start date  
#Inmate not checked by nursing, no start date, no dx  
#Inmate no start date, no dx

9/17/2013 8:30 AM Entered By: Brenda McMullen  
Catalina 10 Mars reviewed 10 mars out of compliance  
#Inmate no start date, no dx  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date, no dx  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date, no dx  
#Inmate no start date, no dx, Tegretol no stop date  
#Inmate no start dates

9/17/2013 8:05 AM Entered By: Brenda McMullen  
Whetstone medications 10 mars reviewed 10 mars out of compliance  
#Inmate no transcriber, no allergies, no dx  
#Inmate no transcriber, no dx, no start date, no allergies  
#Inmate no start date, no dx, no allergies, Vistenl 25mg not given 9/1-16/13 marked as NA  
#Inmate no start date, not checked by nursing, Fluconazole 200 mg not given 9/3-4/13, 9/7/13, 9/11/13, 9/15/13 no explanation  
#Inmate, not checked by nursing, no start date, Tegretol not given 9/1/13 AM, 9/4/13 AM, 9/11/13 AM, 9/14-15/13 AM, no explanation  
#Inmate not checked by nursing staff, no dx, no start date  
#Inmate no transcriber, no allergy, no start date, no dx  
#Inmate no transcriber, no start date, Buspar not given 9/6/13 AM/PM, 9/10-9/11/13 AM/PM, 9/13/13 AM no explanation

9/24/2013 1:51 PM Entered By: Trudy Dumkrieger  
Minors/CDU  
CDU 10MARS reviewed 8/10 MARS not in



September 2013 TUCSON COMPLEX

compliance

Inmate No allergies noted, no DX, no printed signature for 9/6/13.

Inmate No DX, Venlafaxine not signed off.

Inmate No start/stop dates, no transcribers initials, no allergies noted.

Inmate Cogentin not signed off on the 20th, Paxil 40 mg. not signed off the 17 and 18th.

Inmate dKOPS not signed off.

Inmate Gabapentin blank on the 16th PM, and the 17th not signed off at all.

Inmate No start/stop dates.

Inmate No allergies, no DX.

9/24/2013 1:06 PM Entered By: Trudy Dumkrieger

Minors/CDU

Minors 10 MARS reviewed. 10 charts not in compliance.

Inmate Medication not signed off 9/19. No allergies, no DX.

Inmate No start/stop date, no DX, no DOB.

Inmate No DX, no transcribers initials, no start/stop date.

Inmate No DX, no transcribers initials, no start/stop dates.

Inmate No DX, no start/stop dates.

Inmate No start/stop dates, Prozac not signed off on 9/20, Qvar not signed off on the 16th or the 20th.

Inmate No DX, no allergies, no transcribers initials.

Inmate No transcribers initials, no start/stop dates, no DX.

Inmate No start/stop dates, no transcribers initials.

9/12/2013 12:41 PM Entered By: Trudy Dumkrieger

Winchester 10 MARS reviewed. 10/10 charts not in compliance.

Inmate No diagnosis.

Inmate No diagnosis.

Inmate Depakote order for 250mg X7 days then increase to 500mg are both written in the same box.

Inmate No transcribers initials, no diagnosis.

Inmate No transcribers initials, no DOB, no diagnosis, Prednisone no stop date, Norco stop date written as 3/1/13. Paxil DOT not signed as given 9/1-9/8.

Inmate No location, no DOB, no allergies, no diagnosis, no start/stop date, no transcribers initials.

Inmate Buspar no start/stop date.

Inmate No diagnosis, no transcribers initials, meds not signed out 9/1-9/3 ordered 8/26.

Inmate Tegretol no start/stop date.

9/11/2013 3:02 PM Entered By: Trudy Dumkrieger

Santa Rita 10 MARS reviewed. 6/10 charts not in compliance. 1200 meds signed out prior to being given.

Inmate KOP signed out as given on 9/30/13 today is 9/9/13.

Inmate No transcribers initials.

Inmate IM marled as a no show.

Inmate KOP signed out as given twice.

Inmate Marked as a NS on the 4th and 6th.

Inmate No dx, no DOB, no allergies.



September 2013 TUCSON COMPLEX

9/11/2013 2:51 PM Entered By: Trudy Dumkrieger  
Cimarron 10 MARS reviewed 7/10 MARS not in compliance.  
#Inmate No start/stop date, no dignosis.  
#Inmate 9/1

9/20/2013 7:52 AM Entered By: Brenda McMullen  
Manzanita Mars  
10 Mars reviewed 10 Mars out of compliance  
#Inmate no dx, no start date, not checked by nursing staff  
#Inmate no dx, no month, no year, no order date, no start date, no transcriber  
#Inmate not checked by nursing, no dx, no start date  
#Inmate no dx, no start date , Benzoyl Peroxide not given 9/1-16/13 not given no explanation.  
#Inmate no prescriber, no transcriber, no start date, no month, no year, no dx, no allergy, no start date  
#Inmate no dx, no start date  
#Inmate month, no year, no prescriber, no stop date, no start date  
#Inmate not checked by nursing, no start date, no dx  
#Inmate no start date, no dx

9/20/2013 7:49 AM Entered By: Brenda McMullen  
Manzanita Mars  
10 Mars reviewed 10 Mars out of compliance  
#Inmate no dx, no start date, not checked by nursing staff  
#Inmate no dx, no month, no year, no order date, no start date, no transcriber  
#Inmate not checked by nursing, no dx, no start date  
#Inmate no dx, no start date , Benzoyl Peroxide not given 9/1-16/13 not given no explanation.  
#Inmate no prescriber, no transcriber, no start date, no month, no year, no dx, no allergy, no start date  
#Inmate no dx, no start date  
#Inmate month, no year, no prescriber, no stop date, no start date  
#Inmate not checked by nursing, no start date, no dx  
#Inmate no start date, no dx

9/17/2013 8:30 AM Entered By: Brenda McMullen  
Catalina 10 Mars reviewed 10 mars out of compliance  
#Inmate no start date, no dx  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date, no dx  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date  
#Inmate no start date, no dx  
#Inmate no start date, no dx, Tegretol no stop date  
#Inmate no start dates

9/17/2013 8 05 AM Entered By Brenda

September 2013 TUCSON COMPLEX

				<p>Mcmullen                  Whetstone medications 10 mars reviewed 10 mars out of compliance                  #Inmate no transcriber, no allergies, no dx                  #Inmate no transcriber, no dx, no start date, no allergies                  #Inmate no start date, no dx, no allergies, Visteril 25mg not given 9/1-16/13 marked as NA                  #Inmate no start date, not checked by nursing, Fluconazole 200 mg not given 9/3-4/13, 9/7/13, 9/11/13, 9/15/13 no explanation                  #Inmate, not checked by nursing, no start date, Tegretol not given 9/1/13 AM, 9/4/13 AM, 9/11/13 AM, 9/14-15/13 AM, no explanation                  #Inmate not checked by nursing staff, no dx, no start date                  #Inmate no transcriber, no allergy, no start date, no dx                  #Inmate no transcriber, no start date, Buspar not given 9/6/13 AM/PM, 9/10-9/11/13 AM/PM, 9/13/13 AM no explanation                  #Inmate not checked by nursing, no dx, no transcriber, no dx, no allergies, Paroxetine not given 9/2/13, 9/9-11/13 no explanation                  #Inmate no start date Hydroxyzine not given 9/9/13 PM, 9/10/13 AM, 9/13/13 AM, 9/15/13, PM no explanation</p>	
5	Are medication errors forwarded to the FHA to review corrective action plan?		X	<p>9/30/2013 3:06 PM Entered By: Trudy Dumkrieger                  Medication errors are forwarded to the DON and ADON. Seven Errors received and none have corrective action plans.</p>	2
6	Are there any unreasonable delays in inmate receiving prescribed medications?		X	<p>9/30/2013 2:31 PM Entered By: Trudy Dumkrieger                  Amber                  9/30/2013 10:03 AM Entered By: Trudy Dumkrieger                  Rincon                  Inmate Ordered 8/30/13 did not receive until 9/4/13.                  9/26/2013 8:22 AM Entered By: Trudy Dumkrieger                  Winchester Inmate Paxil ordered 7/26/13 Not signed off 9/1-9/8/13. Two week delay in getting medications.                  9/24/2013 1:52 PM Entered By: Trudy Dumkrieger                  Minors                  Inmate medication ordered 8/29/13 did not start until 9/6/13.</p>	2
7	Are inmates being required to show ID prior to being administered their medications?	X		<p>9/20/2013 7:53 AM Entered By: Brenda McMullen                  Observed med pass at Manzanita, Catalina, Whetstone. Inmates required to show ID to nursing.                  9/17/2013 8:32 AM Entered By: Brenda McMullen</p>	2

September 2013 TUCSON COMPLEX

				<p>Observed med pass, inmates required to show ID to nursing.</p> <p>9/30/2013 2:08 PM Entered By: Trudy Dumkrieger All inside yards were compliant.</p> <p>9/30/2013 10:03 AM Entered By: Trudy Dumkrieger</p> <p>9/25/2013 1:01 PM Entered By: Trudy Dumkrieger 9/20/2013 7:53 AM Entered By: Brenda McMullen Observed med pass at Manzanita, Catalina, Whetstone. Inmates required to show ID to nursing.</p> <p>9/17/2013 8:32 AM Entered By: Brenda McMullen Observed med pass, inmates required to show ID to nursing.</p>	
8	<p>Are chronic condition medication expiration dates being reviewed prior to expiration to ensure continuity of care? [NCCHC Standard P-D-01]</p>		X	<p>9/30/2013 2:36 PM Entered By: Trudy Dumkrieger Tucson 140 Formulary scripts reviewed 0 prescriptions reordered on or prior to expiration</p> <p>5 prescriptions reordered after expiration date</p> <p>#Inmate ██████ Buspar/Zoloft exp. 9/8/13 reorder 9/16/13 #Inmate ██████ Risperal exp 9/12/13 reorder 9/17/13 #Inmate ██████ Buspar/Celexa exp 9/12/13 reorder 9/17/13 #Inmate ██████ Celexa exp 9/6/13 reorder 9/17/13 #Inmate ██████ Celexa exp 9/12/13 reorder 9/17/13</p> <p>135 prescriptions not renewed as of 9/18/13</p> <p>#Inmate ██████ Zoloft exp 9/9/13 #Inmate ██████ Haldol exp 9/4/13 #Inmate ██████ Paxil exp 9/11/13 #Inmate ██████ Albuterol, ASA, Beclomethasone inhaler, Coreg, Zocor exp 9/13/13 #Inmate ██████ Glucose exp 9/18/13 #Inmate ██████ Celexa exp 9/18/13 #Inmate ██████ Vasotec exp 9/17/13 #Inmate ██████ Zoloft exp 9/12/13 #Inmate ██████ Ventolin HFA exp 9/18/13 #Inmate ██████ Lisinopril exp 9/2/13 #Inmate ██████ Ventolin HFA exp 9/14/13 #Inmate ██████ Dilantin x2 exp. 9/13/13 #Inmate ██████ Metformin exp 9/11/13 #Inmate ██████ Ventolin HFA exp 9/13/13 #Inmate ██████ Beclomethasone inhaler exp. 9/2/13 #Inmate ██████ Prozac exp 9/12/13 #Inmate ██████ Ocuflor, Prednisolone exp 9/2/13 #Inmate ██████ Congentin, Prolixin, Paxil, Risperdal exp 9/12/13 #Inmate ██████ Zoloft exp 9/8/13</p>	2

September 2013 TUCSON COMPLEX

#Inmate [REDACTED] Vasotec, Mevacor,  
Min pres exp 9/1/13  
#Inmate [REDACTED] Buspar, Celexa exp 9/12/13  
#Inmate [REDACTED] Celexa exp 9/15/13  
#Inmate [REDACTED] Celexa exp 9/12/13  
#Inmate [REDACTED] , Insulin Hum 70/30 exp  
9/1/13  
#Inmate [REDACTED] Paxil exp 9/12/13  
#Inmate [REDACTED] Vasotec exp 9/2/13  
#Inmate [REDACTED] Celexa 9/12/13  
#Inmate [REDACTED] Prozac exp 9/12/13  
#Inmate [REDACTED] Effexor exp 9/16/13  
#Inmate [REDACTED] Citalopram exp 9/17/13  
#Inmate [REDACTED] Buspar exp 9/8/13  
#Inmate [REDACTED] ,glucose exp 9/13/13  
#Inmate [REDACTED] Insulin Detemir exp  
9/8/13  
#Inmate [REDACTED] Celexa exp 9/4/13  
#Inmate [REDACTED] Synthroid exp 9/3/13  
#Inmate [REDACTED] Ventolin HFA exp 9/5/13  
#Inmate [REDACTED] Insulin Hum 70/30 exp  
9/7/13  
#Inmate [REDACTED] Dilantin exp 9/15/13  
#Inmate [REDACTED] Prozac exp 9/18/13  
#Inmate [REDACTED] Zoloft exp 9/3/13  
#Inmate [REDACTED] Cardura exp 9/14/13  
#Inmate [REDACTED] Paxil exp 9/18/13  
#Inmate [REDACTED] Synthroid,, Mevacor exp  
9/16/13  
#Inmate [REDACTED] Celexa, Remeron exp  
9/17/13  
#Inmate [REDACTED] Beclomethasone Inh. Exp  
9/18/13  
#Inmate [REDACTED] Lisinopril exp9/12/13  
#Inmate [REDACTED] Reyatz, Truvada, Lisonopril,  
Norvir exp 9/18/13  
#Inmate [REDACTED] Buspar exp 9/15/13  
#Inmate [REDACTED] Amlodipine exp 9/17/13  
#Inmate [REDACTED] Prozac exp 9/18/13  
#Inmate [REDACTED] Prozac exp 9/5/13  
#Inmate [REDACTED] Insulin Detemir, Insulin  
Hum Reg exp 9/12/13  
#Inmate [REDACTED] Norvasc, ASA 81mg exp  
9/17/13  
#Inmate [REDACTED] Buspar exp 9/6/13  
#Inmate [REDACTED] Depakote , Zoloft exp  
9/17/13  
#Inmate [REDACTED] Insulin Hum NPH, Insulin  
Hum Reg exp 9/15/13  
#Inmate [REDACTED] Buspar exp 9/17/13  
#Inmate [REDACTED] Risperdal 1 mg ,  
Risperdal 3 mg exp 9/10/13  
#Inmate [REDACTED] Paxil exp 9/9/13  
#Inmate [REDACTED] , Prozac exp 9/1/13  
#Inmate [REDACTED] , Buspar, Prozac exp 9/8/13  
#Inmate [REDACTED] , Zoloft exp 9/9/13  
#Inmate [REDACTED] Nitroglycerin SL exp  
9/6/13  
#Inmate [REDACTED] , Hydodiuril exp 9/1/13  
#Inmate [REDACTED] Buspar exp 9/9/13  
#Inmate [REDACTED] , Buspar exp 9/12/13  
#Inmate [REDACTED] , Paxil exp 9/12/13  
#Inmate [REDACTED] Buspar, Celexa exp 9/9/13  
#Inmate [REDACTED] Buspar , Celexa, Risperdal  
, exp 9/9/13  
#Inmate [REDACTED] Glutose, Insulin Hum exp  
9/6/13  
#Inmate [REDACTED] Ventolin HFA. Hydrodiuril  
exp 9/7/13  
#Inmate [REDACTED] Insulin HUM NPH,  
Insulin HUM REG exp 9/14/13  
#Inmate [REDACTED] Zoloft exp 9/12/13  
#Inmate [REDACTED] Celexa, Loxitane 10 mg,  
Loxitane 25mg, exp 9/15/13  
#Inmate [REDACTED] , ASA81mg, Hydrodiuril,

September 2013 TUCSON COMPLEX

				<p>Lisinopril exp 9/11/13                  #Inmate ██████████ Metformin, Nitro SL, K-Dur exp 9/17/13                  #Inmate ██████████, Buspar exp 9/3/13,                  #Inmate ██████████ Glutose exp 9/5/13                  #Inmate ██████████ Insulin Detemir, Insulin HUM Reg exp 9/8/13                  #Inmate ██████████ Beclomehtasone Inh. Exp 9/17/13                  #Inmate ██████████ Lisinopril exp 9/16/13                  #Inmate ██████████ Teormin exp 9/18/13                  #Inmate ██████████ Dilantin exp 9/11/13                  #Inmate ██████████ Plavix exp 9/11/13                  #Inmate ██████████ Ventolin HFA exp 9/5/13                  #Inmate ██████████, Insulin HUM NPH,x2 exp 9/9/13                  #Inmate ██████████ Lopressor expt 9/14/13                  #Inmate ██████████ Insulin HUM NPH exp 9/16/13                  #Inmate ██████████ Lasix exp 9/12/13                  #Inmate ██████████ Synthroid exp 9/2/13                  #Inmate ██████████ Prolixin exp 9/11/13                  #Inmate ██████████ Prozac exp 9/2/13                  #Inmate ██████████ Haldol , cogentin, Remeron, exp 9/11/13                  #Inmate ██████████ Depakote exp 9/8/13                  #Inmate ██████████, Synthroid exp 9/7/13                  #Inmate ██████████, Paxil exp 9/12/13</p> <p>9/30/2013 1:12 PM Entered By: Trudy Dumkrieger                  IPC/HU9 10 charts checked all CC meds current.</p> <p>9/26/2013 8:19 AM Entered By: Trudy Dumkrieger                  Winchester 10 charts checked all meds current.</p>	
9	Are non-formulary requests being reviewed for approval or disapproval within 24 to 48 hours?		X	<p>9/30/2013 2:32 PM Entered By: Trudy Dumkrieger                  amber</p> <p>9/30/2013 10:06 AM Entered By: Trudy Dumkrieger                  Rincon                  #Inmate ██████████ Non-formulary submitted 8/22/13 not approved until 9/23/13.                  #Inmate ██████████ Non-formulary submitted 9/11/13 not approved until 9/18/13.</p> <p>9/26/2013 9:04 AM Entered By: Trudy Dumkrieger                  Cimarron                  #Inmate ██████████ Non formulary written 8/24/13 not approved by 9/3/13.</p> <p>9/25/2013 2:41 PM Entered By: Trudy Dumkrieger                  Whetstone                  #Inmate ██████████ submitted 9/13/13 approved 9/17/13 not within 48 hours.                  #Inmate ██████████ submitted 9/10/13 approved 9/17/13 not within 48 hours                  #Inmate ██████████ submitted 8/21/13 approved 9/17/13 not within 48 hours.</p> <p>9/25/2013 2:06 PM Entered By: Trudy Dumkrieger</p>	2

### September 2013 TUCSON COMPLEX

					<p>Manzanita  <b>Inmate</b> Non Formulary submitted 7/9/13 approved 7/23/13.  <b>Inmate</b> submitted 7/9/13 approved 8/27/13  <b>Inmate</b> submitted 7/9/13 approved 8/10/12  <b>Inmate</b> submitted 9/6/13 approved 9/9/13</p> <p>9/12/2013 1:31 PM Entered By: Trudy Dumkrieger  Winchester  <b>Inmate</b> Non-formulary submitted 8/21/13, resent 9/5/13. Response 9/5/13.</p> <p>9/11/2013 3:04 PM Entered By: Trudy Dumkrieger  Santa Rita  <b>Inmate</b> Non-formulary submitted 8/23/13. Denied 8/30/13.</p>	
10	Are providers being notified of non-formulary decisions within 24 to 48 hours?		X		<p>9/30/2013 2:12 PM Entered By: Trudy Dumkrieger  Most of the providers state they are not being notified.</p> <p>9/11/2013 3:05 PM Entered By: Trudy Dumkrieger  Santa Rita  <b>Inmate</b> Non-Formulary denied 8/30/13 not reviewed by 9/9/13.</p>	2
11	Are medication error reports being completed and medication errors documented?		X		<p>9/30/2013 3:04 PM Entered By: Trudy Dumkrieger  Seven Medication Error Reports received. No corrective action plans included. Two had IRs, two had notes on plain paper, and one had a note on a SOAP Note.</p> <p>Two medication errors that have not been documented on or that I have not gotten are IM <b>Inmate</b>. IM is PMRB and has been allowed to refuse medication. The second one is IM <b>Inmate</b> who was given 44 units of insulin on 6 occasions in stead of the prescribed 4units.</p>	2

## September 2013 TUCSON COMPLEX

### 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: Trudy Dumkrieger Date: 9/30/2013 2:31:02 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process statewide to include, but not limited to :

- a. Refusals/No Show - Policy titled "Appointment or Treatment Refusals" Chapter 5, Section 7.2 (Appendix VI.1.a.).
- b. MAR documentation.
- c. Administration of DOT/KOP.
- d. Printing MARs (Pharmacy Appendix).
- e. Medication error documentation/reporting (Pharmacy Appendix).

2. In-service staff on process and PharmaCorr policy.

- a. Agenda/sign off sheet to verify, inclusive of all pertinent staff.

3. Monitoring (Appendix I. - IV Monitoring Tools)

- a. Audit tools developed.
- b. Weekly site results discussed with RVP.
- c. Audit results discussed a monthly CQI meeting.
- d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties =FHA/DON/RDCQI/RVP/FHA

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

**5 Are medication errors forwarded to the FHA to review corrective action plan?**

**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 3:06:28 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process statewide to include, but not limited to :

- a. Medication error documentation/reporting (Pharmacy Appendix).

2. In-service staff on process and PharmaCorr policy.

- a. Agenda/sign off sheet to verify, inclusive of all pertinent staff.

3. Monitoring (Appendix I. - IV Monitoring Tools)

- a. Audit tools developed.
- b. Weekly site results discussed with RVP.
- c. Audit results discussed a monthly CQI meeting.
- d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties =FHA/DON/RDCQI/RVP/FHA

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

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

**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 2:31:21 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

Intakes-

1. Standardized process for meds to be available to inmate upon transfer (Pharmacy Appendix 1 & 2)

- a. Intake Orders
- b. Private Prisons

2. In-service staff on process per PharmaCorr policy,

- a. Agenda/sign off sheet to verify, inclusive of all pertinent staff

3. Custody educated regarding contract requirements regarding inmate transfer with meds.

4. Monitoring (Appendix I. - IV Monitoring Tools)

- a. Audit tools developed
- b. Weekly site results discussed with RVP
- c. Audit results discussed a monthly CQI meeting



## September 2013 TUCSON COMPLEX

d.Minutes and audit reported monthly to Regional office for tracking and trending  
Responsible Parties = FHA/DON/Custody/RDCQI/RVP  
Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results

- 1.Monitoring (Appendix I. - IV Monitoring Tools)
  - a.Audit tools developed
  - b.Weekly site results discussed with RVP
  - c.Audit results discussed a monthly CQI meeting
  - d.Minutes and audit reported monthly to Regional office for tracking and trending
- 2.Standardized process statewide to include, but not limited to (Appendix III.1.):
  - a.Internal
  - b.External
- 2.In-service staff on process and ADC policy titled "Continuity of Care Upon Transfer" Chapter 5, Section 5.0 (Appendices III.2.);
  - a.Agenda/sign off sheet to verify, inclusive of all pertinent staff
- 3.Custody educated regarding contract requirements regarding inmate transfer with meds
- 4.Monitoring (Appendix I. - IV Monitoring Tools)
  - a.Audit tools developed
  - b.Weekly site results discussed with RVP
  - c.Audit results discussed a monthly CQI meeting
  - d.Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/Custody/RDCQI/RVP  
Target Date - 11/30/13  
Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

### **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: Trudy Dumkrieger Date: 9/30/2013 2:36:26 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

- 1.Standardized process for meds to be available to inmate upon transfer (Pharmacy Appendix 1 & 2)
  - 2.In-service staff on process per PharmaCorr policy,
    - a.Agenda/sign off sheet to verify, inclusive of all pertinent staff
  - 3.Custody educated regarding contract requirements regarding inmate transfer with meds.
  - 4.Monitoring (Appendix I. - IV Monitoring Tools)
    - a.Audit tools developed
    - b.Weekly site results discussed with RVP
    - c.Audit results discussed a monthly CQI meeting
    - d.Minutes and audit reported monthly to Regional office for tracking and trending
- Responsible Parties = FHA/DON/Custody/RDCQI/RVP  
Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results
- 1.Monitoring (Appendix I. - IV Monitoring Tools)
    - a.Audit tools developed
    - b.Weekly site results discussed with RVP
    - c.Audit results discussed a monthly CQI meeting
    - d.Minutes and audit reported monthly to Regional office for tracking and trending
  - 2.Standardized process statewide to include, but not limited to (Appendix III.1.):
    - a.Internal
    - b.External
  - 2.In-service staff on process and ADC policy titled "Continuity of Care Upon Transfer" Chapter 5, Section 5.0 (Appendices III.2.);
    - a.Agenda/sign off sheet to verify, inclusive of all pertinent staff
  - 3.Custody educated regarding contract requirements regarding inmate transfer with meds
  - 4.Monitoring (Appendix I. - IV Monitoring Tools)
    - a.Audit tools developed
    - b.Weekly site results discussed with RVP

## September 2013 TUCSON COMPLEX

c.Audit results discussed a monthly CQI meeting  
d.Minutes and audit reported monthly to Regional office for tracking and trending  
Responsible Parties = FHA/DON/Custody/RDCQI/RVP  
Target Date - 11/30/13  
Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

**9 Are non-formulary requests being reviewed for approval or disapproval within 24 to 48 hours?**  
**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 2:32:50 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1.Standardized process statewide, to include but not limited to (Pharmacy Appendix 1 & 2):

- a.Non-formulary process (Appendix I.1.d.)
  - i.Reviewed for approval within 24-48 hrs
  - ii.Providers notified decision within 24-48 hrs

e.Manifest Reconciliation

f.Inventory control

g.Stock Medications

h.Practitioner Cards (Appendix I.1.h.)

i.Controlled Medications (Appendix I.1.i.)

2.In-service staff

a.Using information from 8/19 - 11/13 Regional office mandatory in-service and PharmaCorr policy

b.Agenda/sign off sheet to verify, inclusive of all pertinent staff (Appendix I.2.b.)

3.Monitoring (Appendix I. - IV Monitoring Tools)

a.Audit tools developed

b.Weekly site results discussed with RVP

c.Audit results discussed a monthly CQI meeting

d.Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/IC/RDCQI/RVP

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – Statewide in Sept Redbook and MAR audit, results reviewed; to audit pharmacy in October related to Controlled Substances and Expired meds.

**10 Are providers being notified of non-formulary decisions within 24 to 48 hours?**  
**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 2:12:45 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1.Standardized process statewide, to include but not limited to (Pharmacy Appendix 1 & 2):

- a.Non-formulary process (Appendix I.1.d.)
  - i.Reviewed for approval within 24-48 hrs
  - ii.Providers notified decision within 24-48 hrs

e.Manifest Reconciliation

f.Inventory control

g.Stock Medications

h.Practitioner Cards (Appendix I.1.h.)

i.Controlled Medications (Appendix I.1.i.)

2.In-service staff

a.Using information from 8/19 - 11/13 Regional office mandatory in-service and PharmaCorr policy

b.Agenda/sign off sheet to verify, inclusive of all pertinent staff (Appendix I.2.b.)

3.Monitoring (Appendix I. - IV Monitoring Tools)

a.Audit tools developed

b.Weekly site results discussed with RVP

c.Audit results discussed a monthly CQI meeting

d.Minutes and audit reported monthly to Regional office for tracking and trending

Responsible Parties = FHA/DON/IC/RDCQI/RVP

## September 2013 TUCSON COMPLEX

Target Date-11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

10/11/13 Update – Statewide in Sept Redbook and MAR audit, results reviewed; to audit pharmacy in October related to Controlled Substances and Expired meds.

### **11 Are medication error reports being completed and medication errors documented?**

**Level 2 Amber User: Trudy Dumkrieger Date: 9/30/2013 3:04:58 PM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: October Action plan submitted by Corizon-

1. Standardized process statewide to include, but not limited to :
  - a. Medication error documentation/reporting (Pharmacy Appendix).
2. In-service staff on process and PharmaCorr policy.
  - a. Agenda/sign off sheet to verify, inclusive of all pertinent staff.
3. Monitoring (Appendix I. - IV Monitoring Tools)
  - a. Audit tools developed.
  - b. Weekly site results discussed with RVP.
  - c. Audit results discussed a monthly CQI meeting.
  - d. Minutes and audit reported monthly to Regional office for tracking and trending.

Responsible Parties =FHA/DON/RDCQI/RVP/FHA

Target Date- 11/30/13

Continue to monitor weekly x 3 weeks, monthly until within compliance, then quarterly; monitoring frequency using audit tool per audit results.

**September 2013 TUCSON COMPLEX**

<b>Staffing</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Is there an approved staffing pattern available to the Site Manager (FHA)? [NCCHC Standard P-C-07; HSTM Chapter 3, Section 2.0]	<b>X</b>			9/28/2013 6:39 AM Entered By: Marlena Bedoya YES.	<b>1</b>
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]		<b>X</b>		9/28/2013 6:38 AM Entered By: Marlena Bedoya All positions are not yet filled therefore; sickcall deadlines are still not being met, and Chronic care backlogs do still remain an issue. There are positives being cited in that backlogs have drastically come down in Provider chart reviews, Nurseline backlogs for most yards, and Provider line backlogs for most yards.	<b>3</b>
3	Are all positions filled per contractor staffing pattern?		<b>X</b>		9/28/2013 6:33 AM Entered By: Marlena Bedoya NO.	<b>2</b>
4	Is the Site Manager (FHA) kept informed of recruiting efforts being taken to fill vacant positions by the corporate office?	<b>X</b>			9/28/2013 6:32 AM Entered By: Marlena Bedoya YES.	<b>2</b>
5	Do Health Services staff meet prerequisites to be able to work on site (CPR, TB clearance, Professional license, NEO, CEUs)?		<b>X</b>		9/28/2013 6:32 AM Entered By: Marlena Bedoya Within an audit ready Complex Credentials Binder - There should be a spread-sheet that reflects due dates for each of the following items on each staff member; (An Annual online print out from the employee's licensing agency / License (or) Training certificate as applicable (or) College Diploma / Annual PPD vaccine (or) if prior converter, an Annual TB Symptomology Sheet / CPR Card / DEA Card / Provider NPI). There should also be copies of each applicable item within the binder. The binder should be updated monthly, with staff being pre-notified to renew the applicable item, and supply an updated copy prior to the item expiring. Upon receipt, the spreadsheet is updated with a copy going into the binder.  During the inspection of the Tucson Credentials binder, (48) prior staff member's Credentialing information still remained in the binder for staff who no longer work here. It was later discovered that some of the members were Agency staff. It was recommended that Agency staff be kept in a separate binder, and only Core staff be kept in the auditable binder. No spreadsheet was found which made the audit take an unnecessary length of time. The following items were found as discrepancies:  - There was no Training certificate, License, or Diploma for the following staff. Pharm Inv Coord - Moreno, E. Pharm Inv Coord - Torres, L.	<b>1</b>

## September 2013 TUCSON COMPLEX

LPN Davis, T.  
LPN Miranda-Hernandez, M.  
LPN Patterson, E.  
MH RN Stone, I.  
MA Berrios, A. (Corizon Training / Med Asst.)  
MA Cheeseman, C. (Corizon Training / Med Asst.)  
NA Lenz, C.  
CNA Lutz, T.  
CNA Short, T.  
(Physician) Catsaros, D. –License in binder expired 3/2013  
(Psychiatrist) Harrison, J.  
(Psychiatrist) Karumanchi, V.  
(Psychiatrist) Martinez-Celaya, J.  
(Psychiatrist) Winsky, R.  
(Psych Assoc) Hanford, T. – Has no license yet, but is being shadowed. Information should be in binder reflecting such.  
(Therapeutic Rec Therapist) – Leming, C.– Copy of Bachelors Degree + Certification should be in binder, per job description.  
(Therapeutic Rec Therapist) – Tyra, B. – Copy of Bachelors Degree + Certification should be in binder, per job description.

- The Annual 2013 online print-out was there from the applicable licensing agency, but no copy of the member's current licensure was found for the following staff:

LPN Gallagher, J.  
LPN Garland, J.  
LPN Shaw, T.  
LPN Smith, T.  
LPN Spica, M.  
LPN Tompkins, B.  
NP Holder, W.  
NP Modrzejewski, J.  
CNA Avilez, I.  
CNA Badilla, E.  
CNA Dineen, C.  
CNA Glenn, K.  
NA Lenz, C. (Corizon Training)  
CNA Lutz, T.  
CNA Martinez-Montoya, L.  
CNA Mulloy, B.  
CNA Sheehan, S.  
CNA Short, T.  
CNA Slyter, E.  
CNA Tyra, A.  
RN Benefield, A.  
RN Copson, M.  
RN Gil, D.  
RN Hernandez, J.  
RN Rutherford, L.

- There was no PPD documentation what so ever, in the binder for any staff member employed. If it is kept in a different place, a copy of each member's sheet, or the annual TB Symptomology sheet should be with each staff member's Credentials in the binder.

- There was no copy of a current CPR card found for the following staff:  
Dental Hygienist – Fisher, N.  
LPN Davis, T.  
LPN Laws, E. (A copy of the back of the card only was in the binder)  
LPN Patterson, E.  
LPN Shaw, T.  
Med Records Clrk – Andrews, A.  
Med Records Clrk – Cruz, P.

## September 2013 TUCSON COMPLEX

					<p>Med Records Clrk – Orduno, J.          Med Records Clrk – Robeson, L.          Med Records Clrk – Whitaker, L.          Med Records Supv – Shaffer, B.          CNA Dineen, C.          CNA Lutz, T.          CNA Martinez-Montoya, L.          CNA Short, T.          (Psychiatrist) Harrison, J. – Expires 9/2013          (Psychiatrist) Karumanchi, V.          (Psychiatrist) Martinez-Celaya, J.          (Psychiatrist) Winsky, R.          RN Garcia, M.          RN Hinton, B.          RN Shepard, R.          Therapeutic Rec Therapist Tyra B.</p> <ul style="list-style-type: none"> <li>- All applicable DEA Certificates were current, with copies in the binder.</li> <li>- All applicable NPI number information was found in the binder.</li> </ul>	
--	--	--	--	--	--	--

### 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: Marlana Bedoya Date: 9/28/2013 6:38:51 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Corizon continues to evaluate staffing patterns and assignments and make adjustments as needed.

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

**Level 2 Amber User: Marlana Bedoya Date: 9/28/2013 6:33:23 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Corizon's recruiting team is working tirelessly at recruiting for the open positions. Locums/Registry and over time being utilized to fill open positions.

**5 Do Health Services staff meet prerequisites to be able to work on site (CPR, TB clearance, Professional license, NEO, CEUs)?**

**Level 1 Amber User: Marlana Bedoya Date: 9/28/2013 6:32:18 AM**

Corrective Plan: See October action plan as submitted by Corizon.

Corrective Actions: Reinforce to Supervisors that Health Services staff must meet prerequisites to be able to work on site.

## September 2013 TUCSON COMPLEX

Discharge Planning						
	Performance Measure (Description)	Grn	Amb	Red	Notifications	Level
1	Are diabetic inmates that were identified as IDDMs while in prison given training on self administration of insulin? {NCCHC Standard P-E-13}	X			9/30/2013 3:11 PM Entered By: Trudy Dumkrieger No IDDM inmates identified as having been release.	1
2	Is the health staff receiving discharge list from complex OIU at a minimum of 30 days out and is a release plan in place prior to inmate's actual release date?	X			9/30/2013 3:18 PM Entered By: Trudy Dumkrieger Yes the list is coming out but changes frequently. One IM released with no discharge plan who is new HIV. IM [redacted]. Discharge plan is done with nurses or wiath Corizon Discharge Planners.	1
3	Are release medications for chronic conditions and mental health medications being provided to the inmate the day of release from prison?	X			9/18/2013 1:36 PM Entered By: Brenda McMullen Whetstone 10 releases reviewed and 10 inmates signed for medication on release. Catalina 10 releases reviewed and 10 inmates signed for medication on release. Manzanita 10 releases reviewed and 10 inmates signed for medication on release.  9/30/2013 3:41 PM Entered By: Trudy Dumkrieger	1
4	Is there a procedure in place for inmates with communicable diseases to be referred to community based services? [NCCHC Standard P-E-13]	X			9/23/2013 12:03 PM Entered By: Trudy Dumkrieger	1
5	When appropriately requested, are medical records being provided to inmate authorized medical providers upon release?	X			9/18/2013 1:36 PM Entered By: Brenda McMullen Yes  9/23/2013 12:03 PM Entered By: Trudy Dumkrieger	1



**September 2013 TUCSON 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?	X			9/30/2013 3:36 PM Entered By: Trudy Dumkrieger	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			9/30/2013 3:37 PM Entered By: Trudy Dumkrieger	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		9/30/2013 3:38 PM Entered By: Trudy Dumkrieger No frequent call offs result in only two liscensed people instead of three on days. Also often have only one nursing assistant with a lot of total care paatients.	1
4	Is a supervising registered nurse in the IPC 24 hours a day?	X			9/13/2013 3:12 PM Entered By: Trudy Dumkrieger	1
5	Is the manual of nursing care procedures consistent with the state's nurse practice act and licensing requirements?	X			9/13/2013 3:13 PM Entered By: Trudy Dumkrieger	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			9/13/2013 3:13 PM Entered By: Trudy Dumkrieger	1
7	Is the frequency of physician and nursing rounds in the infirmiry specified based on categories of care provided?	X			9/13/2013 3:13 PM Entered By: Trudy Dumkrieger	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			9/30/2013 3:38 PM Entered By: Trudy Dumkrieger	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			9/30/2013 3:39 PM Entered By: Trudy Dumkrieger All of the Inpatient record is incorporated into the outpatient chart.	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	X			9/30/2013 3:39 PM Entered By: Trudy Dumkrieger	1

## September 2013 TUCSON COMPLEX

	physician?					
11	Are vital signs done daily when required?	X			9/13/2013 3:14 PM Entered By: Trudy Dumkrieger	1
12	Are there nursing care plans that are reviewed weekly and are signed and dated?		X		9/30/2013 3:40 PM Entered By: Trudy Dumkrieger They do not have them on all IPC inmates yet.	1
13	Are medications and supplies checked regularly, and who is assigned to do it? [NCCHC Standard P-D-03]		X		9/30/2013 3:41 PM Entered By: Trudy Dumkrieger The medication nurse checks the medications, everyone works on supplies.	1

### Corrective Action Plans for Performance Measure: Infirmary Care

**3 Is the number of appropriate and sufficient qualified health professionals in the infirmary determined by the number of patients, severity of illnesses and level of care required?**

**Level 1 Amber User: Trudy Dumkrieger Date: 9/30/2013 3:38:33 PM**

Corrective Plan: We staff the unit with Two RN's, one LPN and two CNA's for 34 patients. We had one CNA out on work a work injury that has returned to work. During his leave we had other employees within the complex who either resigned or terminated and this resulted in short staffing. We have full staff coverage in the infirmary at this time. unfortunately call offs are unpredictable and sometimes there are days where we dont have additional coverage. when this happens the supervisor functions as a fill in.

We will continue to recruit as needed. A copy of the schedule is available if you need. See below.

Corrective Actions: An acuity tool will be developed to ensure appropriate staffing levels for infirmary patient care.

**12 Are there nursing care plans that are reviewed weekly and are signed and dated?**

**Level 1 Amber User: Trudy Dumkrieger Date: 9/30/2013 3:40:30 PM**

Corrective Plan: We have received care plans and the care plans were sent to nursing with instructions to complete on admission and to update them as needed and weekly.

CAP to educate staff again.

Corrective Actions: Reinforce with staff to initiate a care plan upon admission and regularly update, making sure plan is signed and dated.

**13 Are medications and supplies checked regularly, and who is assigned to do it? [NCCHC Standard P-D-03]**

**Level 1 Amber User: Trudy Dumkrieger Date: 9/30/2013 3:41:12 PM**

Corrective Plan: our inventory coordinators check the medications for expiration and renewals. The nursing Supervisor is responsible for supplies.

Corrective Actions: is this approved or rejected

## September 2013 TUCSON COMPLEX

<b>Confidentiality of Health Records</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Are health records maintained under secure conditions separate from correctional records?	X			9/28/2013 6:40 AM Entered By: Marlana Bedoya YES.	1
2	Is access to health records and health information controlled by the health authority?	X			9/28/2013 6:40 AM Entered By: Marlana Bedoya YES.	1
3	Is there evidence that health staff receive instruction in maintaining patient confidentiality?	X			9/28/2013 6:41 AM Entered By: Marlana Bedoya YES. The medical records staff are a group of seasoned veterans who have been at the Complex for many years. They take great strides in protecting the confidentiality of medical information.	1
4	Are the records transported by non-health staff sealed?	X			9/28/2013 6:42 AM Entered By: Marlana Bedoya YES.	1
5	Are non-health staff who observe or overhear a clinical encounter instructed that they must maintain confidentiality?	X			9/28/2013 6:43 AM Entered By: Marlana Bedoya YES. In speaking to each Operations Officer, posted in each Medical Unit; each stated they never discuss information they may over-hear during an Inmate's medical encounter.	1
6	Prior to releasing medical information to the Board of Executive Clemency, has the inmate signed an authorization to release medical information?	X			9/28/2013 6:44 AM Entered By: Marlana Bedoya YES. The IM signs, if he is able.	1
7	Is medical information given to the Warden, Deputy Warden, Deputy Director, and Director when operationally necessary?	X			9/28/2013 6:45 AM Entered By: Marlana Bedoya YES.	1

**September 2013 TUCSON COMPLEX**

<b>Medication Room</b>						
	<b>Performance Measure (Description)</b>	<b>Grn</b>	<b>Amb</b>	<b>Red</b>	<b>Notifications</b>	<b>Level</b>
1	Is the medical room kept locked when not occupied?	<b>X</b>			<p>9/30/2013 9:08 AM Entered By: Trudy Dumkrieger Rincon yes IPC yes</p> <p>9/25/2013 1:04 PM Entered By: Trudy Dumkrieger 9/17/2013 8:34 AM Entered By: Brenda McMullen Whetstone yes Catalina yes Manzanita yes</p> <p>9/24/2013 8:36 AM Entered By: Trudy Dumkrieger Minors/CDU yes.</p> <p>9/13/2013 2:59 PM Entered By: Trudy Dumkrieger Winchester no.</p> <p>9/10/2013 3:06 PM Entered By: Trudy Dumkrieger Santa Rita yes</p> <p>9/5/2013 1:55 PM Entered By: Trudy Dumkrieger Cimarron yes.</p> <p>9/17/2013 8:34 AM Entered By: Brenda McMullen Whetstone yes Catalina yes Manzanita yes</p>	<b>1</b>
2	Are open medication vials being marked with the date they were opened?	<b>X</b>			<p>9/30/2013 9:09 AM Entered By: Trudy Dumkrieger Rincon four vials of Insulin open and undated. IPC good.</p> <p>9/25/2013 1:04 PM Entered By: Trudy Dumkrieger 9/17/2013 8:35 AM Entered By: Brenda McMullen Catalina yes Manzanita yes Whetstone 2 bottles Humulin N open not dated</p> <p>9/25/2013 12:46 PM Entered By: Trudy Dumkrieger Santa Rita Good Winchester Good</p> <p>9/24/2013 8:36 AM Entered By: Trudy Dumkrieger Minors/CDU good.</p> <p>9/5/2013 1:55 PM Entered By: Trudy Dumkrieger Cimarron two vials of insulin open and undated.</p>	<b>1</b>

### September 2013 TUCSON COMPLEX

					<p>9/17/2013 8:35 AM Entered By: Brenda McMullen            Catalina yes            Manzanita yes            Whetstone 2 bottles Humulin N open not dated</p>	
3	Is nursing staff checking for outdated (expiring) medications?	X			<p>9/30/2013 9:09 AM Entered By: Trudy Dumkrieger            IPC yes            Rincon yes</p> <p>9/25/2013 12:47 PM Entered By: Trudy Dumkrieger            Sant Rita yes            Winchester yes            Minors CDU yes</p> <p>9/5/2013 1:56 PM Entered By: Trudy Dumkrieger            Cimarron yes.</p>	1