

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

INMATES OF THREE)
LORTON FACILITIES, et al.,)
)
Plaintiffs,)
)
v.)
)
DISTRICT OF COLUMBIA, et al.,)
)
Defendants.)
)

Civil Action No. 92-1208
(JLG)

PRAECIPE

To the Clerk of the Court: Please accept for filing Defendants' plan by the Medical Administrator of the Three Lorton Facilities to achieve and maintain compliance with the Court's Orders in this case, required under this Court's Order dated February 29, 1996.


Respectfully submitted,

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CERTIFICATE OF SERVICE

I hereby certify that a copy of the defendants' plan by the Medical Administrator of the Three Lorton Facilities was mailed, postage prepaid, to Martin Hacala, et al, Ross, Dixon & Masback, 601 Pennsylvania Ave. N.W., North Building, Washington, D.C. 20004-2688, Jonathan Smith, et al, D.C. Prisoner Legal Services, 1400 20th Street, N.W., Suite 117, Washington, D.C., and Grace Lopes, Special Officer of the U.S. District Court for D.C., 1130 17th Street, N.W., Suite 400, Washington, D.C. 20036, on this 21st day of February, 1997.


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**COMPLIANCE PLAN FOR HEALTH SERVICES
AT MINIMUM, MEDIUM AND YOUTH CENTER**

I. INTRODUCTION:

This Compliance Plan for Health Services at the Minimum, Medium and Youth Center facilities (Three Lorton Facilities) is submitted in accordance with Court-ordered requirements in Inmates of Three Lorton Facilities v. D.C., Civil Action Number 92-1208 (JLG).

The Plan sets forth action the Department of Corrections will take to correct the non-compliance with the Court's orders identified in the February 29, 1996 Order addressing medical, mental health and dental care.

II. COMPLIANCE PLAN OBJECTIVES:

The objectives of the plan are the following:

A. Staffing: Appropriately staff each facility with credentialed health care providers who are appropriately trained and supervised.

B. Access to Health Care: Provide inmates, (including working inmates at Minimum, inmates in dormitories, maximum security and segregation units) with access to sick call, chronic disease clinic, dental care, mental health care and specialty clinics, and maintain appropriate tracking and statistical information regarding access to health care.

C. Dental Care: Provide timely dental care by an appropriately credentialed dental care provider and provide dental triage and/or treatment of painful dental conditions.

D. Mental Health Care: Inmates prescribed psychotropic medications will be seen at the required intervals, in accordance with the Court's order and inmates stabilized on medication will not be denied access to work details, work release or community correctional facilities solely because they have been prescribed psychotropic medication.

E. Pharmacy: Provide prescribed medication to all inmates, including those in lock-down units, within 24 hours of the prescription; provide a substitute for out-of-stock medication without requiring the inmate to return to sick call; and, maintain appropriate documentation of an inmate's medication history in his/her medical record.

F. Emergency care: Provide emergency care, including emergency equipment, appropriately stocked and inspected crash carts, trained staff and an appropriate emergency care space.

G. Tuberculosis Screening & Treatment Plan: Establish and implement a program for the treatment and prevention of TB at the Three Lorton Facilities that includes staff training and a tracking procedure.

H. Quality Assurance/Improvement: Develop and implement a suitable medical quality assurance/improvement program. Maintain records of all quality assurance/improvement activities.

I. Special Medical Diets: Provide inmates with appropriate special diets prescribed for medical or dental reasons.

J. Advanced Cardiac Life Support (ACLS): Develop a proposal to modify the original decree requirement that all nursing staff working on single provider shifts have ACLS certification. Ensure that all nursing staff working on single provider shifts have the requisite skill and experience to appropriately handle emergencies.

K. Basic Life Support and Emergency Response: Provide basic life support and appropriate emergency response services at the Three Lorton Facilities twenty-four (24) hours per day, seven (7) days per week.

L. Abatement of non-compliance with the Court's Orders: Develop and implement a procedure to identify and remedy non-compliance with the Court's orders which includes the following: procedures to identify non-compliance, plans to remedy non-compliance, identification of individual(s) who will implement corrective action, specific timetable for achieving compliance, and review of the results of the corrective action.

M. Policies and Procedures to Implement the Compliance Plan: Develop, disseminate and post written policies and procedures consistent with this Compliance Plan.

N. Training and Education of Staff: Develop and implement education and training for all health care staff providing care to the inmates at the Three Lorton Facilities regarding the Court's orders in the Three Lorton Facilities litigation as well as this Compliance Plan.

obtain a renewal in a timely manner, or be suspended or terminated.²

- d. The Health Services Administrator shall identify staff or contract employees to temporarily replace any staff member whose license has expired until the license is renewed, if indicated. This activity will take place 30 days prior to the expiration of a staff member's license. The Health Services Administrator will arrange relief coverage through overtime, reassignment or contractors.

2. Provide clinical supervision of all staff on all shifts.

- a. Appoint Chief Medical Officer for clinical management who has the following duties and responsibilities:³ (Completed)
 - i. Provide supervisory authority over all staff (including medical officers, dentists, physician assistants, chief supervisory nurses, clinical nurses, chief pharmacist, line pharmacists, infection control officers, medical record librarian, medical record technicians, and quality assurance specialist for the Three Lorton Facilities) as appropriate, in matters relating to clinical care; (Ongoing)
 - ii. Participate in the achievement and maintenance of compliance with the Court's orders.
 - iii. Initiate meetings with wardens, perform monthly chart review at each of the Three Lorton Facilities, participate in the development of treatment protocols in conjunction with the Health Services Coordinator, and other duties as assigned; (Ongoing)
 - iv. Maintain open and frequent communication with all health care staff and be accessible for consultation with health care staff; (Ongoing)

² See sample notice, attached as Exhibit 1.

³ A Chief Medical Officer was appointed in October 1996 who has supervisory authority over the staff of the Three Lorton Facilities.

- v. Review monthly reports from the charge medical officers of each institution and the monthly court-ordered report, and take corrective action where appropriate; (Ongoing)
 - vi. Co-chair the Compliance Task Force's bi-weekly meeting with the Health Services Administrator; (Ongoing)
 - vii. Provide 24 hours a day, seven days a week on-call coverage for emergencies, or designate responsibility to appropriately trained and licensed staff; (Ongoing)
 - viii. Conduct regular unscheduled inspections of all areas where health care is delivered, including medical units, lock down units, and dental units; (Ongoing)
 - ix. Hold monthly meetings with the medical officers, the Health Services Administrator, Data Control Technician, Lorton supervisory nurses, clinical nurses, medical record librarian, Chief of Mental Health and Chief of Dental Services, the quality assurance specialists, and the acting chief pharmacist; (Ongoing)
 - x. Encourage open communication amongst employees at staff meetings; (Ongoing)
 - xi. Report directly to the Health Services Administrator. (Ongoing)
- b. The Health Services Administrator shall have the following duties and responsibilities:
- i. Supervise the administration of health care at the Three Lorton Facilities to comply with the

⁴ Several inspections were conducted by the Chief Medical Officer of the Three Lorton Facilities, commencing in September of 1996. On some of the inspections, the Chief Medical Officer was accompanied by the Wardens and/or facilities management staff.

⁵ The Compliance Task Force for the Three Lorton Facilities began to meet on August 8, 1996. Meetings have been held bi-weekly. The meetings have served as an interdisciplinary forum for discussions, problem resolution, brain-storming, and as an opportunity for staff input in the Compliance Plan.

Court's orders in *Inmates of Three Lorton Facilities, et al v. D.C., et al*, C.A. No 92-1208 (JLG);

- ii. Provide administrative supervision of all health care staff at the Three Lorton Facilities;
 - iii. Develop and implement procedures for the delivery of care, tracking the delivery of care, identifying noncompliance with the Court's orders and coordinating corrective action to achieve compliance.
- c. The Chief Supervisory Nurse, Lorton Complex, shall supervise the clinical practice of nurses throughout the Lorton Complex, including the Three Lorton Facilities, in conjunction with the Chief Medical Officer for the Three Lorton Facilities and the Interim Assistant Director of Health Services.
3. Monitor staffing and workload on a monthly basis.
- a. Develop tracking form called the "Daily Accountability Form" which records daily the number of staff present for each shift. (Completed)
 - b. Implement a periodic reporting procedure to compare staffing in the "Daily Accountability Form" with the number of inmates seen on the sick call summary and respond appropriately.⁶ (Ongoing)
4. Sick Call shall be conducted by a physician or physician assistant.
- a. Assign physicians and/or physician assistants to conduct sick call daily at the Three Lorton Facilities. (Completed)
 - b. Issue a written directive that only a physician and/or physician assistant can conduct sick call at the Three Lorton Facilities. (Completed)
 - c. Develop a procedure for staff at the Three Lorton Facilities to immediately report the absence of

⁶ The periodic reporting procedure monitors compliance with Court-ordered staffing requirements on a daily basis on all shifts. The report is completed by the charge nurse and forwarded to the Health Services Administrator on a daily basis. See Exhibit 2.

staff to conduct sick call due to sick leave, annual leave, emergency leave, administrative leave, AWOL or furlough.⁷ (Ongoing)

5. Develop and implement procedure to identify and assign qualified staff to conduct chronic disease clinic when health care staff are on sick leave, annual leave, emergency leave, administrative leave, AWOL or furlough.⁸ (Completed)
6. The Health Service Administrator shall promptly prepare and submit personnel actions to the Office of Human Resources requesting immediate recruitment of candidates to fill any vacant physician positions. (Ongoing)
7. The Health Services Administrator will request physician assistants from the contractor in a timely manner after notice that a physician assistant position is or will be vacant. (Ongoing)

B. ACCESS TO HEALTH CARE

1. Sick call shall be held at the Three Lorton Facilities five days each week. Inmates shall be seen at the next available sick call after signing the sick call list or notifying staff of the need for medical attention.
 - a. Hold sick call in individual examination rooms to maintain patient confidentiality. (Ongoing)

⁷ On shifts two and three, the Chief and/or charge medical officers will review the staffing level at the start of each shift. If the staffing level is not consistent with the Court's orders, the charge medical officer will immediately contact the Chief Medical Officer who will advise the Health Services Administrator. The Health Services Administrator will arrange relief coverage through overtime, reassignment or contractors.

On shift number one, the contractor will notify the Supervisory Nurse when a night nurse is absent. The supervisory nurse will arrange for relief coverage from the contractor.

⁸ See procedures described in paragraph one of footnote 7.

- b. Develop uniform sick call sign-up sheet.⁹
(Completed)
- c. Distribute and use the uniform sick call sign up sheet at the Three Lorton Facilities. (Ongoing)
- d. Develop a "Sick Call Summary" sheet filled out by each medical unit which tracks the following: the number of individuals who sign up for sick call, the number seen, the number who refuse care or fail to appear, the number of individuals who go to sick call and are not seen, and the number of inmates who are not seen,¹⁰ due to the lack of transportation/escort.
- e. Analyze the "Sick Call Summary" sheets quarterly to identify the number of inmates seen at sick call, the reasons inmates are not seen and barriers to the access to health care. Take remedial action, as necessary.
- f. Develop a procedure by which statistical information tracking sick call is periodically compiled, reviewed and reported to the Interim Assistant Director for Health Services and the Health Services Coordinator. (Completed)
- i. The Health Services Administrator, in concert with the Data Control Technician, will compile the statistics from the "Sick Call Summary Statistics", the "Specialty Clinic Tracking Form", the "CDC Listing" form, the "CDC Monthly Summary" form, the "Weekly Dental Report", and the "Dental Sick Call Summary" form.

⁹ A sick call sign-up sheet was distributed to the Wardens of each facility on October 22, 1996. Subsequently the sick call sign-up sheet was revised in format only. The revised Medical Request Sign Up Form is attached as Exhibit 3. This sick call sign-up sheet is used in all housing units, including lockdown and segregation units.

¹⁰ See form entitled "Sick Call Summary Statistics," attached as Exhibit 4. The charge nurse fills out this form after obtaining information from the escort officers who bring the inmates to the sick call unit, the "Sick Call Sign Up and Tracking Form" completed by the physician, attached as Exhibit 5, and the Master Sick Call Sign Up and Tracking Form completed by the nurses, also attached as Exhibit 5.

- ii. The data will be compiled on a daily and a monthly basis.¹¹ Commencing April 1997, the data will be analyzed quarterly to assess the delivery of care in accordance with the Court's orders, identify noncompliance, and implement corrective action.
 - iii. The Health Services Administrator and the Data Control Technician will prepare a memorandum analyzing the information which shall be forwarded to the Health Services Coordinator, through the Interim Assistant Director for Health Services, with a copy to the Chief Medical Officer, the charge medical officers, the charge nurses, the wardens, and the Quality Assurance Specialist.
 - iv. The Quality Assurance Specialist shall make recommendations for corrective action, where applicable.
 - v. Remedial action will be taken if indicated, consistent with the Section L of this plan regarding abatement.
2. Provide access to sick call to inmates who work or are in lock-down and segregation units.
 - a. Hold sick call for inmates who work at Minimum Security Facility on the evening shift, 2:00 p.m. to 10:00 p.m. (Ongoing)
 - b. Assign a PA or physician to conduct sick call daily in the lock down and segregation units at the Youth Center and Medium Security Facility. (Ongoing)
 - c. Track daily transport/escort to the health care unit of inmates in the lock down and segregation units at the Youth Center and Medium Security Facility, where appropriate, through the "Sick Call Summary Statistics" described above. (Ongoing)
 3. The precipitation barriers at the Minimum and Medium facilities shall be properly maintained. Any problem with the precipitation barrier shall be immediately reported to the Warden of the facility who shall make every reasonable effort to make immediate repairs.

¹¹ See the "Monthly Statistics Form," attached as Exhibit 6.

4. Inmates will be seen in specialty clinics within four weeks from the date of referral or sooner in case of medical emergencies.
- a. Implement a manual tracking log at each facility which will be maintained by the Specialty Clinic Nurse. (Ongoing)
 - b. The Specialty Clinic Nurse will compile a list of referrals daily and fax the list to the Trip Coordinator at D.C.G.H. (Ongoing)
 - c. Develop a tickler system to alert the Specialty Clinic Nurse scheduling the appointments of the approaching deadlines for compliance. (60 days¹²)*¹³
 - d. If an appointment cannot be scheduled within the Court-ordered time frame, the Specialty Clinic Nurse will notify the referring physician and the Health Services Administrator. (Ongoing)
 - e. The Health Services Administrator will monitor, review, and evaluate, as well as track statistically, all referrals to the Specialty Clinics, intervening when indicated to meet the Court-ordered time frame. (60 days)
 - f. Develop and implement forms and procedures to track the following: the number of individuals referred to specialty clinics, the timeliness of actual appointments, the number who are not seen within the Court-ordered time frame, the reason the inmate was not seen (including no/show or refusal), no transport, DCGH cancellation or delay.¹⁴ (Completed)
 - g. Develop a procedure by which statistical information tracking specialty clinic referrals is periodically compiled, reviewed, and reported to

¹² The time for this deadline, and all other deadlines established in this plan, will commence on the date of the filing of the plan.

¹³ See Section O, on page 21, for an explanation of the asterisks.

¹⁴ See Specialty Clinic Tracking Form, attached as Exhibit 7.

the Interim Assistant Director for Health Services and the Health Services Coordinator.¹⁵

4. Appropriately follow, refer and see inmates who have chronic diseases.
 - a. Inmates diagnosed with chronic diseases¹⁶ identified during the intake review of medical records, or diagnosed during a health services encounter, are recorded by name and illness into a manual tracking log, maintained by a chronic disease nurse. (Ongoing)
 - b. Inmates identified with chronic diseases are referred for follow-up chronic disease clinic (CDC) appointments which are recorded in the CDC log. (Ongoing)
 - c. The Chronic Disease Nurse compiles a list of referrals for CDC daily, and a call out pass is issued to bring the inmate to the health care unit. (Ongoing)
 - d. Develop and implement the "CDC Listings" form prepared daily by each medical unit which tracks the following: individuals referred to chronic disease clinics; nature of illness; treatment; and return appointment to CDC.¹⁷ (Completed)
 - e. Develop and implement the "CDC Summary Statistics Form" prepared monthly which tracks the following: number of individuals scheduled for CDC; the number of inmates seen; the number who refused care or failed to appear; the numbers who are referred to CDC and are not seen; and the number of inmates who are not seen due to the lack of transportation/escort.¹⁸ (Completed)

¹⁵ See the procedures outlined above in sections III(B)(1)(f)(i-v).

¹⁶ The chronic disease category includes, but is not limited to the following: tuberculosis, heart disease, asthma, AIDS, hypertension, diabetes, seizure disorder, hepatitis, renal disease, post surgery patients, and certain gynecological problems.

¹⁷ See Exhibit 8.

¹⁸ See Exhibit 9.

- f. Implement Monthly Statistical Form by which statistical information tracking CDC clinic referrals is periodically compiled, reviewed and reported to the Interim Assistant Director for Health Services and Health Services Coordinator.¹⁹
(Completed)

C. DENTAL CARE

1. Provide timely dental care by providing inmates with dental triage within 24 hours of signing a dental sick call list or of referral.
 - a. Develop uniform sick call sign up sheet for medical and dental care.²⁰ (Completed)
 - b. Distribute and implement use of the uniform sick call sign up sheet at the Three Lorton Facilities. (Ongoing)
 - c. The Minimum Facility inmates will be seen by a dentist for the purpose of triage on Thursdays and Fridays at the Minimum Facility. The dentist will review the dental sick call list, call out inmates to conduct triage, and schedule inmates for treatment according to level of acuity. The inmates will be seen for dental treatment at the Central Facility on Mondays, Tuesdays and Wednesdays. (Ongoing)
 - d. The Medium Facility inmates will be seen by a dentist for the purpose of triage on Mondays and Wednesdays at the Medium Facility. The dentist will review the dental sick call list, call out inmates to conduct triage, and schedule inmates for treatment according to level of acuity. The inmates will be seen for dental treatment at the Occoquan Facility on Tuesdays, Thursdays and Fridays. (Ongoing)
 - e. At Youth Center, dental treatment will be provided five days each week. The dentist will review the dental sick call list daily, call out inmates to

¹⁹ See the procedures outlined above in sections III(B)(1)(f)(i-v).

²⁰ See Exhibit 3.

conduct triage, and schedule inmates for treatment according to level of acuity.²¹ (Ongoing)

2. Provide transport and dental care as soon as practical, but in no event more than twenty-one (21) days following an inmate's request for treatment.
3. Appoint a Chief Dental Officer for clinical management with the following duties and responsibilities:²²
 - a. Review monthly reports from the dental officers of each institution and the monthly Court-ordered report, and take action where appropriate; (Ongoing)
 - b. Post written notification to staff that the Chief Dental Officer, or designee, is available 24 hours a day, seven days a week for emergencies; (Completed)
 - c. Maintain open and frequent communication with the health care staff at the Three Lorton Facilities; (Ongoing)
 - d. Conduct regular unscheduled inspections of all areas where dental health care is delivered, including medical units, lock down and segregation units, and dental units; (Ongoing)
 - e. Attend monthly meetings with the Chief Medical Officer, the Health Services Administrator, the Data Control Technician, charge medical officers, Lorton Supervisory Nurses, Clinical Nurses, Record Librarians, Chief of Mental Health, the Quality Assurance Specialists, and the acting Chief Pharmacist; (Ongoing)
 - f. Hold mandatory periodic meetings with dental staff, and maintain documentation regarding attendance; (Ongoing)
 - g. Periodically review the attendance records of the mandatory dental staff meetings, and take appropriate action when necessary; (Ongoing)

²¹ A new operatory was installed at the Youth Center in November 1996.

²² A Chief Dental Officer with supervisory authority over all dentists and dental assistants was appointed in August 1996 to supervise dental care at the Three Lorton Facilities.

- h. Encourage open communication amongst employees at staff meetings;
- i. The dental assistant assigned to provide services for each of the Three Lorton Facilities shall schedule dental appointments and arrange transport to bring the inmate to the dental unit; (Ongoing)
- j. Develop and implement dental tracking forms prepared daily by each dental unit which tracks the following: individuals referred for dental care; nature of problem; treatment; and date of return appointment, if any; (Ongoing)
- k. Develop and implement the "Dental Summary Statistics Form" prepared monthly which tracks the following: number of individuals scheduled for dental care; the number of inmates seen; the number who refuse care or fail to appear; the numbers who are referred to dental and are not seen; and the number of inmates who are not seen due to lack of transportation/escort;²³ (Completed)
- l. Implement Monthly Statistical Form by which statistical information tracking dental care is periodically compiled, reviewed and reported to the Interim Assistant Director for Health Services and Health Services Coordinator.²⁴ (Completed)

D. MENTAL HEALTH CARE

- 1. Develop and implement procedures whereby inmates prescribed psychotropic medication are evaluated by a psychiatrist at least once every two weeks, unless a psychiatrist notes in the medical record that, in her/his clinical judgment, the inmate may be seen less frequently, but in no event less than every four weeks.
 - a. Maintain a psychiatric clinic logbook for each facility indicating the inmate's name, DCDC number, reason for referral and the clinic return date. (Ongoing)

²³ See "Weekly Dental Report," attached as Exhibit 10 and "Dental Summary Statistics Form," attached as Exhibit 11.

²⁴ See the procedures outlined above in sections III(B)(1)(f)(i-v).

- b. The psychiatric clinic nurse will review the logbook, schedule the follow up appointment and arrange transport. (Ongoing)
- c. Develop and implement a tracking and recall plan consistent with the procedures used at the Occoquan Facility.²⁵ (60 days)*

E. PHARMACY

- 1. Ensure the availability of medication to all inmates, including those in lock-down and segregation units, within 24 hours of the prescription, and ensure that the pharmacists advise the physicians of out-of-stock medications.
 - a. Develop and implement a form for the Acting Chief Pharmacist to send to the medical officers notifying them of out-of-stock medications.²⁶ (Completed)
 - b. Inmates who need medication for chronic diseases shall be seen in the Chronic Disease Clinic at least once every 15 days to renew prescriptions for medication.²⁷ (Ongoing)
 - c. Each pharmacist will contact the Acting Chief Pharmacist to inform him of out-of-stock medication within her/his assigned area.²⁸ (Ongoing)
- 2. Substitute prescribed out-of-stock medication with in-stock medication without requiring the inmate to return to sick call.

²⁵ See Exhibit 12, "Tracking and Recall System for Inmates Receiving Psychiatric Care at the Occoquan Facility."

²⁶ See "Pharmacy Alert Form", attached as Exhibit 13. The form will be faxed to the medical units upon notice to the pharmacist that a medication is out of stock.

²⁷ For the CDC tracking procedure, see III(B)(4), supra.

²⁸ When the pharmacist notifies the Chief Pharmacist that medication is out of stock at one of the Three Lorton Facilities' pharmacy, the Chief Pharmacist shall check the Central Pharmacy Warehouse to determine if the medication is in stock. If it is in stock, a Health Service courier shall deliver it to the facility immediately.

- a. The pharmacist will contact the medical officer by telephone to request an appropriate substitute for the out-of-stock medication. (Ongoing)
- b. Develop and implement a log to record substitutions of temporarily out-of-stock medications.²⁹ (Ongoing)
- c. The physician shall use the Doctor's Order Sheets to prescribe all medication, and the Doctor's Order Sheets shall be maintained in the inmate's medical record.³⁰
- d. Develop a log which appropriately and expeditiously records the distribution of over-the-counter medications (OTCs).³¹ (Completed)
- e. Identify staff and implement procedures to periodically review and evaluate the OTC log.³² (Ongoing)

F. Emergency care

- 1. Provide organized and properly maintained emergency equipment.
 - a. Develop and implement procedures for routine periodic inspections and surveys of all emergency equipment. (Ongoing)
 - b. The Health Services Administrator and the Chief Medical Officer will conduct quarterly, unannounced surveys of the entire emergency area of each facility. The Health Services Administrator will also invite the following personnel (or a

²⁹ See "Three Lorton Facilities Temporarily Out of Stock Medications" form, attached as Exhibit 14.

³⁰ See Doctor's Order Sheet, attached as Exhibit 15.

³¹ Attached as Exhibit 16 is a sample "Over the Counter Medication Log" which will be maintained by the LPN distributing the OTCs.

³² The OTC log is reviewed and evaluated monthly by the Supervisory Nurse, Lorton Complex and the Acting Chief Pharmacist in consultation with the Chief Medical and Dental Officers, Three Lorton Facilities. The team will make recommendations to the Health Services Administrator regarding their findings.

designee): Chief Medical and Dental Officer,
Supervisory Nurses, and the Wardens.³³

- c. Identify staff and implement procedures to record results of each survey and review for immediate corrective action. (40 days)
2. Provide a uniformly stocked crash cart which is inspected each shift. Develop and implement a procedure for routine inspections and surveys of crash carts, including verification that they are fully stocked with current medications, and maintain appropriate documentation.³⁴ (40 days)*
3. Provide a sanitary and organized emergency care unit.
 - a. Organize and clean all emergency units, removing unnecessary items, arranging emergency equipment so that it is readily accessible, and clearing ingress and egress to the unit. (Completed)
 - b. Establish a routine and periodic schedule for the maintenance of the emergency units which contains procedures for cleaning and organization daily and after each use. The daily cleaning and maintenance shall be monitored by the charge nurse.
 - c. Identify staff and implement procedures to inspect the emergency units monthly, record the results and review each survey for immediate corrective action. (Ongoing)
4. Develop and implement procedures to ensure that all staff are prepared to handle emergencies appropriately. Periodically conduct emergency drills on each shift at

³³ The target date for the first survey is April 1997. The survey will be reviewed and recommendations will be forwarded to the Chief Pharmacists, Supervisory Nurses, Charge Medical Officers and Charge Nurses and the Interim Assistant Director of Health Services. The Health Services Administrator will oversee correction of deficiencies.

³⁴ The Crash Cart is checked by the nursing staff at the beginning of each shift and at the end of each shift. This task is monitored by the Chief Supervisory Nurses.

each of the Health Care units at the Three Lorton Facilities.³⁵ (Ongoing)

G. Tuberculosis Screening & Treatment Plan

1. Develop and implement the Tuberculosis Screening and Treatment Plan. (40 days)*
2. Identify and implement a tuberculosis tracking procedure.³⁶ (40 days)*
3. Commencing April 1997, the Health Services Administrator will analyze the data relating to TB prevention and treatment on a quarterly basis. The Health Services Administrator and the Data Control Technician will forward a memorandum containing this analysis to the Health Services Coordinator, through the Interim Assistant Director for Health Services, with a copy to the Chief Medical Officer, the charge medical officers, the charge nurses, the wardens, and the Quality Assurance Specialist. The Quality Assurance Specialist shall make recommendations for corrective action, where applicable.

H. Quality Assurance/Improvement

1. Design and implement a Quality Assurance/Improvement program that contains at least the same elements that are required to be implemented pursuant to the Court's order at the Central Facility.³⁷
 - a. The plan shall include, but is not limited to: authority for the plan; monitoring and evaluating

³⁵ Emergency drills were conducted at the Three Lorton Facilities during January 1997. The assessments of the emergency drills were forwarded to the Health Services Coordinator for recommendation and action.

³⁶ The Department has developed and implemented a "TB Tracking Form" which tracks PPD and chest x-ray results and follow-up, attached as Exhibit 17.

³⁷ A proposed plan was submitted during the week of January 7, 1997 to the Three Lorton Facilities' supervisory staff for review and approval. Upon review and approval, it will be submitted to the Interim Assistant Director for Health Services and the Health Services Coordinator. A finalized plan is anticipated by February 28, 1997 and will be filed with the Court as a supplement to this Compliance Plan.

all aspects of health services; focused studies on aspects of care at each facility; bi-weekly meetings; and identity of the person responsible for each activity.

2. Assign a Quality Assurance/Improvement Specialist to the Three Lorton Facilities.³⁸ (Completed)
3. Develop and implement a tracking mechanism for the activities of the Quality Assurance/Improvement Program.
 - a. The Quality Assurance/Improvement Specialist shall prepare a monthly report to the Health Services Administrator and meet regularly to discuss quality assurance findings and determine appropriate action. (Ongoing)

I. Advanced Cardiac Life Support (ACLS)

1. Develop a proposal to modify the requirement in the November 22, 1994 Consent Decree that all nursing staff working on single provider shifts have ACLS certification.
 - a. Develop and submit a proposal to plaintiffs' counsel establishing the requisite skill and experience for nurses on single provider shifts to appropriately handle emergencies. (40 days)
2. Petition the Court to modify the requirement in the November 22, 1994 Consent Decree that all nurses on single provider shifts be ACLS certified. (60 days)

J. Special Medical Diets

1. Provide inmates with appropriate special diets prescribed for medical or dental reasons.
 - a. Physicians will order special medical diets in writing. The physician's order sheet will be revised in consultation with the Special Officer and her expert. (60 days)
 - b. The physician will provide the special diet order to the food service contractor on a timely basis.

³⁸ A Quality Assurance/Improvement Specialist was assigned exclusively to the Three Lorton Facilities on October 28, 1996 and reports to the Health Services Administrator.

- c. The food service contractor, the Health Services unit and the Warden's office will maintain a list of the inmates ordered special diets and the types of diets ordered. (Ongoing)
- d. The inmate will be provided with the special diet within 24 hours of the order. (Ongoing)

2. Monitor the provision of special diets.

- a. An assessment of the adequacy of special diets at other DOC facilities is being conducted by the Special Officer and her expert. Those findings and recommendations will be addressed and serve as a basis for improving the preparation and delivery of therapeutic diets. (Ongoing)

K. Basic Life Support and Emergency Response

- 1. Train all correctional staff at the Three Lorton Facilities in CPR and basic first aid procedures.
 - a. In coordination with the Wardens, audit basic first aid and CPR training of all correctional staff at the Three Lorton Facilities to determine the identities of staff members who require training and/or re-certification. (Completed)
 - b. Conduct CPR training for all correctional staff at the Three Lorton Facilities who require recertification, and maintain appropriate documentation. (240 days)
 - c. Conduct CPR training for all correctional staff at the Three Lorton Facilities who have never received CPR training, and maintain appropriate documentation. (30 days)

L. Abatement of Non-compliance with the Court Orders

- 1. Develop and implement a procedure to identify and remedy non-compliance with the Court's orders which will include the following: procedures to identify non-compliance, identification of obstacles to achieving compliance, plan to remedy non-compliance and overcome obstacles, the identity of individual(s) who will implement corrective action, the specific timetable for achieving compliance, and review of the results. (60 days)*

M. Policies and Protocols to Implement the Compliance Plan

1. Develop written policies and procedures consistent with this Compliance Plan.
 - a. The Department shall develop written policies and procedures consistent with this plan. They will address, but are not limited to, the following topics: credentials; sick call; specialty clinics; chronic disease clinic; dental care; quality assurance/improvement, and other parts of this Plan as deemed appropriate. (180 days)*
 - b. The policies and procedures will be circulated to all staff and posted in the Three Lorton Facilities. (180 days)
2. Develop written treatment protocols for the clinical management of the following areas of care, including, but not limited to: chronic diseases, common illnesses, emergencies, dental care and mental health care.
 - a. Identify the specific areas of care which require treatment protocols. (60 days)*
 - b. Develop and implement the identified treatment protocols. (180 days)*
 - c. Review all treatment protocols on an annual basis.

N. Training and Education of Staff

1. Develop and conduct education and training of all health care staff regarding the Court's orders relating to the Three Lorton Facilities and this Compliance Plan.
 - a. Develop a training curriculum regarding the mandates of the Court's orders and this Compliance Plan for training of all present employees and contract staff, and for inclusion in orientation curricula for incoming employees and contract staff. (60 days)*
 - b. Schedule and conduct training of Health Services DOC staff and contract employees. (90 days)

O. Provision of Future Plans/Procedures

1. All items included in this plan which are marked with an asterisk shall be provided to plaintiffs' counsel for review and approval one week prior to the deadline. The parties shall endeavor, in good faith, to resolve any

disputes regarding these matters prior to the expiration of the deadline. If the parties cannot agree, the Special Officer will assist with the resolution of this matter consistent with the provisions of the February 29, 1996 Order.



Government of the District of Columbia
DEPARTMENT OF CORRECTIONS
Health Services
Lorton, Virginia 22079

Exhibit 1

Office of the Administrator

Date

MEMORANDUM

TO : _____

FROM : Lorella B. Willis, CHE
Administrator for Three Lorton Facilities

RE : Pending Expiration of License

According to our records your license will expire within 60 days. You are hereby directed to renew your license.

If you do not renew your license prior to expiration, you will not be allowed to practice for the District of Columbia Department of Corrections. Appropriate administrative actions, inclusive of termination will be initiated for failure to comply.

Should there be questions regarding this letter, do not hesitate to call me. The telephone number is 703-643-6012.

Distribution:

P. Broadnax, Interim Assistant Director of Health Services
H.E. Branson, MD
J.F. Coley, DDS



**Government of the District of Columbia
DEPARTMENT OF CORRECTIONS
Health Services
Lorton, Virginia 22079**

Exhibit 2

**THREE LORTON FACILITIES
DAILY SIGN IN/OUT ACCOUNTABILITY LOG**

PAY PERIOD ENDING: _____

DATE: _____

WORK AREA:

[illegible]

I HAVE REVEIUED THE ABOVE INFORMATION AND VERIFIED ACCURACY.

SUPERVISOR

THREE LORTON FACILITIES
MEDICAL SICK CALL REQUEST

Exhibit 3

DORM # _____

FACILITY _____

DATE _____

TIME	NAME	DCDC#	MEDICAL	DENTAL

PLEASE CONTACT YOUR DORM OIC IF YOU ARE UNABLE TO KEEP YOUR
MEDICAL/DENTAL APPOINTMENT. DO NOT WRITE MEDICAL PROBLEM ON
THIS FORM.

SBS/96

CHARGE OFFICER

GOVERNMENT OF DISTRICT OF COLUMBIA
DEPARTMENT OF CORRECTIONS
HEALTH SERVICES

FACILITY: _____

DATE: _____

MEDICAL PROVIDER: _____

PAGE: _____ OF _____

**MASTER
SICK CALL SIGN-UP AND TRACKING FORM**

[illegible]

A. INMATE DECLINED
B. CANCELLED (Institution)
C. CANCELLED (Health Services)

D. NOT COMPLETED
E. NO TRANSPORTATION/ESCORT
F. NO SHOW

THREE LORTON FACILITIESMONTHLY STATISTICS

MONTH _____ 19__

	MINIMUM	MEDIUM	YOUTH CENTER	TOTAL
<u>GENERAL POPULATION:</u>				
SICK CALL				
a. SCHEDULED	_____	_____	_____	_____
b. NO SHOW/W.O.	_____	_____	_____	_____
c. NOT SEEN	_____	_____	_____	_____
d. NO TRANSPORT	_____	_____	_____	_____
e. WALK-IN	_____	_____	_____	_____
TOTAL SEEN	_____	_____	_____	_____
** PPD TESTING				
<u>SEGREGATED POPULATION:</u>				
SICK CALL				
a. SCHEDULED	_____	_____	_____	_____
b. NO SHOW/W.O.	_____	_____	_____	_____
c. NOT SEEN	_____	_____	_____	_____
d. NO TRANSPORT	_____	_____	_____	_____
TOTAL SEEN	_____	_____	_____	_____
<u>INTERNAL CLINICS:</u>				
1. SPECIALITY				
a. SCHEDULED	_____	_____	_____	_____
b. NO SHOW/W.O.	_____	_____	_____	_____
c. NOT SEEN	_____	_____	_____	_____
d. NO TRANSPORT	_____	_____	_____	_____
TOTAL SEEN	_____	_____	_____	_____
2. CHRONIC DISEASE (CDC)				
a. SCHEDULED	_____	_____	_____	_____
b. NO SHOW/W.O.	_____	_____	_____	_____
c. NOT SEEN	_____	_____	_____	_____
d. NO TRANSPORT	_____	_____	_____	_____
TOTAL SEEN	_____	_____	_____	_____

Three Lorton Facilities
Statistical Report
Page Two

	Minimum	Medium	Youth Center	Total
--	---------	--------	-----------------	-------

EXTERNAL CLINICS:

1. SPECIALITY

- a. SCHEDULED
- b. NO SHOW/W.O.
- c. NOT SEEN
- d. NO TRANSPORT

TOTAL SEEN

2. INFECTIOUS DISEASE (IDC)

- a. SCHEDULED
- b. NO SHOW/W.O.
- c. NOT SEEN
- d. NO TRANSPORT

TOTAL SEEN

DENTAL CLINIC:

- a. SCHEDULED
- b. NO SHOW/W.O.
- c. NOT SEEN
- d. NO TRANSPORT

TOTAL SEEN

PHARMACY

- a. RX ORDERED
- b. RX FILLED
W/I 24 hrs.

EMERGENCY TRANSFER

- a. DCGH
- b. HUH
- c. OTHER

INTAKE

SPECIALTY CLINIC TRACKING FORM

FACILITY

MONTH

[illegible]

[illegible]

LBW

CHRONIC DISEASE CLINIC: MONTHLY SUMMARY

FACILITY _____

MONTH _____

[illegible]**CHIEF OR SENIOR PHYSICIAN**

DATE _____

REASONS:

- A. Doctor not available (sick, snow, furlough, etc.)**
B. No patients scheduled
C. Institution operational priorities (riot, lockdown, etc.)

LBW

**THREE LORTON FACILITIES
WEEKLY DENTAL REPORT**

DATE: _____

STAFF

STAFF	MON.	TUES.	WED.	THURS.	FRI.	TOTAL
DENTIST						
DENT. ASST.						

MINIMUM

SCHED.						
NO SHOW						
NOT SEEN						
NO TRANSP.						
SEEN						

MEDIUM

SCHED.						
NO SHOW						
NOT SEEN						
NO TRANSP.						
SEEN						

YOUTH CENTER

SCHED.						
NO SHOW						
NOT SEEN						
NO TRANSP						
SEEN						

SICK CALL SUMMARY STATISTICS - DENTAL

MONTH

[illegible]

REVIEWED BY CHIEF MEDICAL OFFICER

- A. INMATE DECLINED
- B. CANCELLED (INSTITUTION)
- C. CANCELLED (HEALTH SERVICES)
- D. NOT COMPLETED
- E. NO TRANSPORTATION/ESCORT
- F. NO SHOW

1bw: 1/97

FEB 15 '96 12:11 FROM SPC OFFICER OF COURT

PAGE.

**TRACKING AND RECALL SYSTEM FOR INMATES RECEIVING
PSYCHIATRIC CARE AT THE OCCOQUAN FACILITY**

This system is designed to facilitate the orderly tracking and recall of inmates receiving psychiatric care at the Occoquan Facility. The procedure will be as follows:

1. A clinic logbook will be maintained so that all clinic appointments are recorded in a central location. The dates when a screening clinic will take place at Occoquan, for a three month period, will be noted in the logbook.
2. Each sheet in the logbook will contain the following information for each clinic date: Name, DCDC, reason for referral, date to return to clinic and recommendation.
3. The nurse who notes a psychiatrist's order for a clinic appointment on the Psychiatric Consultation Sheet shall record the inmate's name, DCDC and reason for referral in the clinic logbook on the appropriate date in accordance with the psychiatrist's order. If the order is a medication order, the nurse shall also transcribe the order to the Patient Drug Administration Record.
4. At the end of each week, the weekend nurse shall review the clinic logbook for the prior week to verify that all "Return To Clinic" dates have been transcribed in the logbook on the appropriate date in accordance with the psychiatrist's order. The weekend nurse shall also verify that any inmate who has missed an appointment has been rescheduled for the next available clinic.
5. Any nurse who receives a referral for a new intake or request for an urgent assessment shall place the inmate's name, DCDC and reason for referral in the logbook on the next available clinic date. If an emergency assessment is necessary, the nurse shall immediately contact the psychiatrist on call.
6. The logbook shall be reviewed by the nurse assisting with the clinic prior to each screening clinic. Each logbook entry will be used as the basis for the schedule of appointment on that date. A list containing the inmate's name, DCDC and location shall be submitted to the transport officer and the medical records clerk.
7. If an inmate's clinic appointment is missed due to cancellation, the inmate's refusal, or any other reason, the inmate shall be rescheduled for the next available clinic date or earlier if clinically indicated.

INTAKE: MENTAL HEALTH SCREENING

NAME: _____ DCDC#: _____ DATE OF BIRTH: _____
ALLERGIES: _____

A. MENTAL HEALTH HISTORY: (Check Positive Response)

- () Previous Mental Health Treatment: _____
() Previous Psychiatric Diagnosis: _____
() History of Depression/Suicidal/Self Injurious Behavior: _____
() Substance Abuse History: _____
() Eating Disorder: _____ Anorexia _____ Bulimia
() Psychiatric Medication/Dosage: _____

Past

Current

B. MENTAL STATUS ASSESSMENT: (Check All That Are Appropriate)

Orientation Thought Disorder
____ Time ____ Disorganized ____ Paranoid/Delusional
____ Place ____ Incoherent ____ Hallucinations
____ Person ____ Impaired Concentration ____ No Abnormality

Mood/Affect

____ Inappropriate ____ Anxious ____ Withdrawn ____ Angry
____ Cooperative ____ Blunted ____ Depressed ____ Suspicious
____ Talkative ____ Tearful ____ Labile ____ Aggressive
____ Euphoric

Suicidal Ideation

____ Yes
____ No
____ Intent
____ Plan: _____

Homicidal Ideation

____ Yes
____ No
____ Intent
____ Plan: _____

Appearance/Hygiene

____ Good
____ Fair
____ Poor

Posture

____ Good
____ Fair
____ Poor

Motor Activity

____ Agitated
____ Restless
____ Slowed
____ Normal

C. IMPRESSION/EVALUATION:

D. PLAN: ____ Continue Medication Type: ____
____ Refer to Psychiatrist Consultation Completed: ____ Yes
____ Other: _____

E. RECOMMENDED HOUSING:

[] Special Housing [] Open Population [] Other

INTERVIEWER/TITLE

DATE

8. If an inmate misses two consecutive clinic appointments, mental health staff will interview the inmate to explain to him the importance of attending clinic appointments. If the inmate states that he does not intend to attend screening clinic, he will be asked to sign a medical refusal form. If the inmate states that he intends to attend clinic but fails to do so, the information will be referred to the Chief Psychiatrist for disposition.

R_x

******* PHARMACY ALERT*******

(DATE)

THE PHARMACY IS CURRENTLY OUT OF THE FOLLOWING:

Please call your designated pharmacist to discuss available substitutions.

The anticipated delivery date is: _____

Your will be notified upon its arrival.

Chief Pharmacist

Exhibit 14

MONTH _____ **YEAR** _____

[illegible]

DOCTOR'S ORDERS

Exhibit 15

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION			↓	DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
NAME	DOB	DCDC #			_____ HOURS	
NURSING UNIT	ROOM NO.	BED NO.				

PATIENT IDENTIFICATION			↓	DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
NAME	DOB	DCDC #			_____ HOURS	
NURSING UNIT	ROOM NO.	BED NO.				

PATIENT IDENTIFICATION			↓	DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
NAME	DOB	DCDC #			_____ HOURS	
NURSING UNIT	ROOM NO.	BED NO.				

PATIENT IDENTIFICATION			↓	DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
NAME	DOB	DCDC #			_____ HOURS	
NURSING UNIT	ROOM NO.	BED NO.				

Exhibit 16

16

START TIME: _____ 16

END TIME: _____

[illegible]

1

LBW

COLD TABLETS (12 TABLETS)

START TIME: _____

END TIME: _____

[illegible]

LAXATIVES (2 TABLETS)

START TIME: _____

END TIME: _____

Reviewed by: _____ Date: _____

LBW

DENTAL DAMS (5 ITEMS)

START TIME: _____

END TIME: _____

[illegible]

LBW

CONDOMS (5 ITEMS)

START TIME: _____

END TIME: _____

[illegible]

LBW

MENSTRUAL PAIN RELIEVER (4 TABLETS)

START TIME: _____

END TIME: _____

[illegible]

LBW

ANTACIDS (1 ROLL)

START TIME: _____

END TIME: _____

[illegible]**LBW**

FACILITY

[illegible]