



STATE OF MICHIGAN
DEPARTMENT OF CORRECTIONS
LANSING

GRETCHEN WHITMER
GOVERNOR

HEIDI E. WASHINGTON
DIRECTOR

Women’s Huron Valley Correctional Facility – Medical, Dental, Optical Services

Source: OAG 471-0301-19

Report release date: June 2020

Audit recommendations MDOC complied with:	0
Audit recommendations MDOC agrees & will comply:	4
Audit recommendations MDOC disagrees with:	n/a

MDOC Corrective Action Plan
Approved by OIAS: August 28, 2020

Finding 01 – Improvements needed to complete timely chronic care condition healthcare assessments

(material)

MDOC Will Comply

Estimated timeframe for completion: August 2021

Status Update: The Department has moved towards scheduling chronic care appointments by risk stratification. Implementation of this new method was completed when the new health record (COMS) was implemented. Facility staff will monitor timeliness of care through reports run from COMS. Policy language has been drafted to reflect this new standard, and staff have been provided with training and guidelines for scheduling. Due to the pandemic and Executive Order, chronic care clinics that were paused are now beginning to be scheduled. Since the beginning of 2020, 507 chronic care encounters have been conducted. Health Care Leadership at WHV will continue to work with the scheduler and monitor ongoing compliance through weekly reports on the status of appointments pending, scheduled, and completed.

Respondent: Duncan Howard, Administrative Manager, BHCS

Finding 02 – Completion of annual healthcare screenings needs improvement

(reportable)

MDOC will Comply

Estimated timeframe for completion: August 2021

Status Update: MDOC will continue to educate staff on the importance of completing the annual health screens timely. MDOC will establish a semiannual audit of the process to ensure timeliness of the annual health screens

Respondent: Duncan Howard, Administrative Manager, BHCS

Finding 03 – Timely processing of prisoner-initiated healthcare requests needs improvement

(reportable)

MDOC will Comply

Estimated timeframe for completion: August 2021

Status Update: MDOC Nursing leadership at WHV has already completed an internal audit and identified some delays in processing kites. They re-trained health care staff on the process requirements and have followed up on recent kites to ensure compliance.

Nursing staff responsible for kite processing are being held accountable for this task and counseling memorandums are issued when this responsibility is not appropriately addressed. Training by RN-13 staff has been implemented to assist in ensuring that uniform understanding, processing, and policy compliance occurs.

The Department will continue with this audit process to ensure the kites are triaged within the time frame, date stamped, and prisoners provided with a response.

Respondent: Duncan Howard, Administrative Manager, BHCS

Finding 04 – Improvements needed to consistently charge prisoner copayments

(reportable)

MDOC will Comply

Estimated timeframe for completion: August 2021

Status Update: COMs was implemented in January 2020 which allows for the co-pay process to be automatically triggered in the health record. The health record includes a process where health care staff must select whether a copayment should be charged for the encounter. The system also allows for the ability to generate reports to better monitor that copayments are being charged. To ensure ongoing monitoring of the record is completed, supervisors will be addressing this at staff meetings, conducting training and holding staff accountable through that monitoring. Additionally, Health Care requests and encounters are reported in the monthly report and reviewed by supervision to ensure that the copayment policy is followed. It is noted that since January 2020 and the implementation of the health record in COMS, co-pays have been charged. A report through COMS is available to demonstrate compliance.

Respondent: Duncan Howard, Administrative Manager, BHCS