



Virginia Department of Corrections

CQI Public Meeting

30 June 2023 at 2:00 P.M.

In Person Meeting

Location: 6900 Atmore Drive
Richmond, VA 23225


Agenda/Minutes:

- I. Call to order
- II. Roll Call of Committee Members
 - a. Committee members present: A. Brennan; R. Provau; M. Amonette; H. Ray; S. Herrick; D. Malone; M.Cary
 - b. Committee members absent: A. Wyatt; T.Fuller; J. Walters
 - c. Public: None
- III. New Business
 - a. VADOC HSU Continuous Quality Improvement Meeting 2nd Quarter – Presentation by Distarti Whitehead
 - i. Presentation available at: [Reports and Publications — Virginia Department of Corrections](#)
 - b. R. Provau made a motion to enter the presentation into the record and post on DOC website, which was seconded by M.Cary. With no further discussion, the Committee voted 7-0 in favor.
- IV. Actions for next quarter
 - a. Recommend to bring forward facilities undergoing ACA audit within the last quarter and report out an evaluation of healthcare outcomes with a review of the facilities that passed or failed the audit standards.
 - b. Recommended to bring forward information related to the ACA healthcare outcomes and the ratio threshold that would trigger a corrective action plan.
 - c. Recommended to bring forward information regarding ACA measures being quantitative vs. qualitative assessments.
 - d. S. Herrick made a subsequent motion, which was seconded by M.Cary. With no further discussion, the Committee voted 7-0 in favor.
- V. Closed Session
 - a. Pursuant to Code §§ 2.2-3712(A) and 2.2-3711(A)(7), S.Herrick made a motion to enter into closed session, which was seconded by R. Provau. With no further discussion, the Committee voted 7-0 in favor to proceed into closed session. Dr. Stephen Herrick, Dr. Mark Amonette, Dr. Meredith Cary, Dr. Denise Malone, Rachel Provau, Angie Brennan, and Howard Ray, along with Diane Abato, legal counsel, participated in the closed session.
 - b. At the conclusion of the discussion in closed session, those who participated in the closed session voted and all certified that to the best of each member's knowledge only matters permitted under Code § 2.2-3712(D) were discussed.

Health Services Unit: A healthy body and healthy mind leads to healthy choices.

With no comments and there being no further business, the Committee adjourned at 3:09PM.



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HSU CQI Meeting 2nd Quarter June 30, 2023

Distarti Whitehead RN, MSN/Ed
HSU Quality Improvement Specialist

2022 Health Care Outcomes

- Information presented is within the past twelve months of 2022
- Deerfield Correctional Center and Stafford Community Corrections Alternative Program successfully passed the American Correctional Association (ACA) Audit
- Stafford CCAP uses the Performance Based Standards for Adult Community Residential Services (ACRS) to report their outcomes.

Stafford CCAP

Standard 1A

- Number of illnesses requiring medical attention as a result of the physical environment of the facility
- Number of physical injuries or emotional trauma requiring treatment as a result of the physical environment of the facility

Standard 1C

- Number of injuries requiring medical attention that result from emergencies that were not caused by forces external to the facility

Standard 4A

- Number of documented resident illnesses attributed to food services operations

Stafford CCAP Standard 4C

- Number of suicide attempts
- Number of resident suicides
- Number of resident grievances regarding access to health care
- Number of resident health care access complaints that are found to have merit
- Number of court suits filed against the facility challenging access to health care
- Number of health care access court cases decided against the facility

Standard 1A Deerfield CC

- **Number of inmates diagnosed with MRSA**
- **Number of inmates diagnosed with active tuberculosis**
- **Number of inmates who are new converters on a TB test that indicates newly acquired TB infection**
- **Number of inmates who completed treatment for latent tuberculosis infection**
- **Number of inmates diagnosed with Hepatitis C viral infection** (at any given time)
- **Number of inmates diagnosed with HIV infection** (at any given time)

Standard 1A Deerfield CC

- **Number of inmates with HIV infection who are being treated with HAART** (at any given time)
- **Number of selected inmates with HIV infection who have been on antiretroviral therapy for at least six months with a viral load of less than 50 cps/ml** (at any given time)
- **Number of inmates with an active individualized services/treatment plan for a diagnosed mental disorder(excluding sole diagnosis of substance abuse)** (at any given time)

Standard 1A Deerfield CC

- Number of inmate admissions to off-site hospitals
- Number of inmates transported off-site for treatment of emergency health conditions
- Number of inmate specialty consults completed
- Number of selected hypertensive inmates with a B/P reading $>140\text{mm hg}/>90\text{ mm hg}$ (at any given time)
- Number of selected diabetic inmates who are under treatment for at least six months with a hemoglobin A1C level measuring greater than 9 percent (at any given time)
- The number of completed dental treatment plans

Standard 2A Deerfield CC

- Number of health care staff with lapsed licensure or certification
- Number of new health care staff that completed orientation training prior to undertaking their job
- Number of occupational exposures to blood or other potentially infectious material
- Number of direct care staff with a conversion of a TB test that indicates newly acquired TB infection

Standard 3A Deerfield CC

- Number of inmate grievances related to health care services found in favor of the offender
- Number of inmate grievances related to safety or sanitation
- Number of adjudicated inmate lawsuits related to the delivery of health care found in favor of the inmate

Standard 4A Deerfield CC

- Number of problem identified by quality assurance program that were corrected
- Number of high-risk events or adverse outcomes identified by the quality assurance program
- Number of inmate suicide attempts
- Number of suicides
- Number of unexpected natural deaths
- Number of serious medication errors