

Cook County Jail

Sixteenth Monitoring Report

by

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EXECUTIVE SUMMARY

During the week of April 30, 2018, the Medical Monitoring Team (Monitoring Team) visited Cook County Jail. The team included: Esmail Porsa, MD, MBA, MPH, CCHP-P, CCHP-A, Muthusamy Anandkumar, MD, MBA, Madeleine LaMarre FNP-BC, and Linda Pansulla, RN, MBA, CCHP. The Monitoring Team visited several of the Cook County Jail medical facilities and housing units. We also interviewed various Cermak and Cook County Department of Corrections (CCDOC) leadership and front line staff as well as Cook County Jail inmates. We extend our most sincere thanks to all the Cermak and CCDOC leadership and staff for their hospitality and generosity with their time and resources. We additionally thank Cermak and CCDOC leadership and staff for their openness to the Monitoring Team suggestions and our critical appraisal of Cermak's processes and activities over the past six months. Cook County Jail Cermak and CCDOC personnel were completely cooperative and helpful in this monitoring visit. The Monitoring Team enjoyed full and unhindered access to all areas and staff.

All provisions of medical care have sustained substantial compliance since our last visit in November 2017. Of note, the timely access to medical and dental care for urgent conditions has been addressed. We were able to sample a large number of routine and urgent medical and dental sick call requests and verify that in almost all instances face to face nurse sick call encounters are occurring on the same day or the following day after a sick call request has been submitted. Similar to our previous visits, we were able to identify recurring and new best in class activities at Cermak. These include infection prevention, OB care, detox care, intake screening (previously mentioned) as well as dental care and sick call electronic dashboard (newly recognized). We will more fully recognize these achievements in the body of this report.

As discussed in our exit meeting, the Monitoring Team would like to congratulate Cermak and CCDOC for their continued commitment to maintaining a robust and functional partnership that is with no doubt one of the main reasons for the continued success and efficacy of both entities in the provision of correctional health care services in a safe environment. We hope that this partnership is sustained. Considering the current status of Cermak with regard to the continued substantial compliance with all the provisions of the agreed order and Cermak's proven desire and knowhow of continuing down the path of a high reliability organization, the Monitoring Team would like to unanimously recommend that medical monitoring of the Cook County Jail be brought to conclusion. We would like to congratulate Cermak leadership and the front line staff for this momentous achievement.

Introduction and Report Organization

On Monday April 30, 2018, the population of Cook County Jail was reported as 5,988. There were another 2,068 inmates listed under “Community Corrections Population” bringing the total under custody population to 8,056. This was the lowest census at Cook County Jail since this Monitoring Team began visiting Cermak four years ago.

Definitions and Organization

This report is formatted in the manner requested by the Department of Justice and closely follows the Agreed Order. The report includes four parts for each section of the Agreed Order.

In part one; we rewrite verbatim the pertinent portion of the Agreed Order. This first part is labeled Remedial Measure of Agreed Order.

The second part is the overall compliance rating labeled Compliance Assessment. This is the assessment that the Monitoring Team experts make based on judgment, data, and chart reviews. Throughout this Agreed Order, the following terms are used when discussing compliance: substantial compliance, partial compliance, and non-compliance: “Substantial Compliance” indicates that the relevant Defendant(s) has achieved compliance with most or all components of the relevant provision of the Agreed Order. “Partial Compliance” indicates that compliance has been achieved on some of the components of the relevant provision of the Agreed Order, but significant work remains. “Non-compliance” indicates that most or all of the components of the Agreed Order provision have not yet been met. Non-compliance means that much work needs to be done before compliance is met. When indicated, the Monitoring Team will additionally assess the various components (sub-bullet points) of certain sections of the Agreed Order. Our goal is to highlight areas of success and bring focus to areas that need further refining and attention.

The third part is the factual basis for forming the opinion in the Compliance Assessment. This will be as data driven as possible. For patient care areas, chart reviews form a substantial portion of this review. Touring, interviews, and reviewing data sources is also an important means of making assessments.

The fourth part is our recommendations. These recommendations are our view of what needs to be accomplished to attain and maintain compliance. This will include the Monitoring Team's recommendations for self-monitoring activities and audits.

HEALTH CARE SERVICES: ELEMENTS COMMON TO MEDICAL AND MENTAL HEALTH

41. Inter-Agency Agreement

- a. CCDOC shall enter into a written Inter-Agency Agreement with Cermak that delineates the mutual responsibilities of each party, relative to the provision of health care to inmates at the Facility. The Inter-Agency Agreement shall be finalized within 60 days of the effective date of this Agreed Order.
- b. Cermak shall enter into a written Inter-Agency Agreement with CCDOC that delineates the mutual responsibilities of each party, relative to the provision of health care to inmates at the Facility. The Inter-Agency Agreement shall be finalized within 60 days of the effective date of this Agreed Order.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Monitor's Findings:

Spot checking showed no lapses in compliance.

Monitor's Recommendations:

None.

42. Policies and Procedures

Cermak shall provide adequate services to address the serious medical and mental health needs of all inmates, in accordance with generally accepted professional standards. The term "generally accepted professional standards" means those industry standards accepted by a

majority of professionals in the relevant field, and reflected in the standards of care such as those published by the National Commission on Correctional Health Care (“NCCHC”).

- a. Cermak shall develop and implement medical care policies, procedures and practices to address and guide all medical care and services at the Facility, including, but not limited to the following:
 - i. access to medical care
 - ii. continuity of medication
 - iii. infection control
 - iv. medication administration
 - v. intoxication and detoxification
 - vi. documentation and record keeping
 - vii. disease prevention
 - viii. sick call triage and physician review
 - ix. intake screening
 - x. chronic disease management
 - xi. comprehensive health assessments
 - xii. mental health
 - xiii. women’s health
 - xiv. quality management
 - xv. emergent response
 - xvi. infirmary care
 - xvii. placement in medical housing units
 - xviii. handling of grievances relating to health care

- xix. mortality review
- xx. care for patients returning from off-site referrals
- c. Cermak shall develop and implement policies, procedures and practices to ensure timely responses to clinician orders including, but not limited to, orders for medications and laboratory tests. Such policies, procedures and practices shall be periodically evaluated to ensure timely implementation of clinician orders.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Monitor's Findings:

Spot checking showed no lapse in compliance.

Monitor's Recommendations:

None.

43. Medical Facilities

- a. CCDOC will work with Cermak to provide sufficient clinical space, as identified by Cermak staff, to provide inmates with adequate health care to meet the treatment needs of detainees, including: intake screening; sick call; medical and mental health assessment; acute, chronic, emergency and specialty medical care (such as geriatric and pregnant inmates); and acute, chronic and emergency mental health care.
- b. Cermak shall make known to CCDOC and Cook County its needs for sufficient clinical space, with access to appropriate utility and communications capabilities, to provide inmates with adequate health care to meet the treatment needs of inmates including:

intake screening; sick call; medical and mental health assessment; acute, chronic, emergency and specialty medical care (such as geriatric and pregnant inmates); and acute, chronic and emergency mental health care.

- c. Cook County shall build out, remodel, or renovate clinical space as needed to provide inmates with adequate health care to meet the treatment needs of detainees as identified by Cermak staff including: intake screening; sick call; medical and mental health assessment; acute, chronic, emergency and specialty medical care (such as geriatric and pregnant inmates); and acute, chronic and emergency mental health care.
- d. Cermak shall ensure that medical areas are adequately clean and maintained, including installation of adequate lighting in examination rooms. Cermak shall ensure that hand washing stations in medical care areas are fully, equipped, operational and accessible.
- e. Cermak shall ensure that appropriate containers are readily available to secure and dispose of medical waste (including syringes and medical tools) and hazardous waste.
- f. CCDOC shall allow operationally for inmates reasonable privacy in medical and mental health care, and shall respect the confidentiality of inmates' medical status, subject to legitimate security concerns and emergency situations. Reasonable privacy typically includes sight and hearing privacy from other inmates, and hearing privacy from staff that are not providing care.
- g. Cermak shall make known to CCDOC and Cook County the structural and operational requirements for inmates' reasonable privacy in medical and mental health care. Cermak shall provide operationally for inmates' reasonable privacy in medical and mental health care and shall respect the confidentiality of inmates' medical status, subject to legitimate security concerns and emergency situations. Reasonable privacy typically includes sight

and hearing privacy from other inmates, and hearing privacy from staff that are not providing care.

- h. Cook County shall build out, remodel or renovate clinic space as needed to allow structurally for inmates' reasonable privacy in medical and mental health care, as identified by Cermak and CCDOC staff.
- i. Cook County shall begin construction of the new clinical space within 3 months of the effective date of this Agreed Order. It is expected that the project will be completed within nine months of the effective date of this Agreed Order. Prior to the completion of the new clinical space, Cook County and DFM will work with Cermak to address the most serious concerns regarding clinical space, to the extent possible in the current facility.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such is no longer being monitored except for spot check monitoring as indicated.

Monitor's Findings:

Spot checking showed that medical facilities remain in substantial compliance.

Monitor's Recommendations:

Sustain improvements in clinic organization and sanitation. Ensure that environmental cleaning takes place as scheduled in the Divisions and Cermak administrative areas.

44. Staffing, Training, Supervision and Leadership

- a. Cermak shall maintain a stable leadership team that clearly understands and is prepared to move forward toward implementation of the provisions of this Agreed Order, with respect to:
 - i. Medical care; and
 - ii. Mental health care
- b. Cermak shall maintain an adequate written staffing plan and sufficient staffing levels of health care staff to provide care for inmates' serious health needs, including:
 - i. Qualified Medical Staff; and
 - ii. Qualified Mental Health Staff.
- c. Cermak shall ensure that all Qualified Medical Staff and Qualified Mental Health Staff are adequately trained to meet the serious health care needs of inmates. All such staff shall receive documented orientation and in-service training on relevant topics, including:
 - i. Provision of health care in a correctional setting and Facility-specific issues; and
 - ii. Suicide prevention, and identification and care of inmates with mental illness.
- d. Cermak shall ensure that Qualified Medical Staff receive adequate physician oversight and supervision.
- e. Cermak shall ensure that all persons providing health care meet applicable state licensure and/or certification requirements, and practice only within the scope of their training and licensure. Upon hiring and annually, Cermak shall verify that all health care staff have current, valid, and unrestricted professional licenses and/or certifications for:
 - i. Medical staff; and
 - ii. Mental health staff

- f. Cermak will work with CCDOC to develop and maintain a curriculum for initial and periodic training of correctional officers on recognition and timely referral of inmates with medical urgencies, including drug and alcohol withdrawal. Cermak will provide adequate initial and periodic training on these topics to all Cermak staff who work with inmates.
- g. CCDOC will provide, to all CCDOC staff who work with inmates, adequate initial and periodic training on basic mental health information, including the identification, evaluation, and custodial care of persons in need of mental health care, as well as recognition of signs and symptoms evidencing a response to trauma; appropriately responding to mental illness; proper supervision of inmates suffering from mental illness; and the appropriate use of force for inmates who suffer from mental illness. Such training shall be conducted by a Qualified Mental Health Professional, registered psychiatric nurse, or other appropriately trained and qualified individual.
- h. Cermak will work with CCDOC to develop and maintain a curriculum for initial and periodic training of correctional officers on basic mental health information, including the identification, evaluation, and custodial care of persons in need of mental health care, as well as recognition of signs and symptoms evidencing a response to trauma; appropriately responding to mental illness; proper supervision of inmates suffering from mental illness; and the appropriate use of force for inmates who suffer from mental illness. Such training shall be conducted by a Qualified Mental Health Professional, registered psychiatric nurse, or other appropriately trained and qualified individual.
- i. Cermak shall ensure that all health care staff receive adequate training to properly implement the provisions of this Agreed Order, including:

- a. Medical staff; and
- b. Mental health staff.

Compliance Status:

This provision remains in substantial compliance.

Monitor's Findings:

1. Since our last visit in November 2017, Cermak has lost its Director of nursing as well as several nurse managers. While the overall vacancy rate stands at 16%, the vacancy rate for staff physician in the medical area is at 40%. The Monitoring Team was assured that within the next three months at least four new physicians including graduating residents will be on boarded. This will dramatically reduce the overall medical physician vacancy from 40% to 20%. Additionally, the census of Cook County Jail is at a historic low for the duration of our monitoring engagement thus negating any potential negative impact of physician vacancy. Additionally, we did not identify any gaps in the provision of medical care related to physician vacancy. System wide, there has been a net gain of 2 new staff positions. 13 new staff positions have been created including two Quality Assessment Coordinators, seven case managers and four case workers. 11 staff positions were eliminated. Since November 2017, there have been 35 new hires and 44 new vacancies (transfers, resignations, retirements, terminations, etc.). The overall vacancy rate across Cermak is currently at 16% or 108 total vacancies (576 out of 684 total positions filled). There is one Advanced Practice Provider (PA) and eight Attending physician position vacancies. Patient Care Services including nursing vacancy now stands at 15%. Cermak continues to utilize overtime, contract labor (moonlighting, locums, etc.) and part time staffing to meet their provision of health service needs.

2. The Monitoring Team did not review the annual training, Ongoing Professional Practice Evaluation (OPPE) or the credentialing files of Cermak professional staff since this provision has been in substantial compliance for more than 18 months.
3. We did not review ongoing initial and interval training of CCDOC officers as this provision has been in substantial compliance for more than 18 months.
4. While the Monitoring Team is encouraged about the continued drop in the inmate census at the Cook County Jail, we remain vigilant that staffing and processes of care at the jail continue to meet the needs of the detainee population.

Monitor's Recommendations:

1. We strongly recommend that Cermak remains vigilant on filling nursing and staff physician vacancies to further improve the provision of health care as well as to reduce the utilization of overtime and contract labor.
2. Maintain/improve vacancy rate across the system but especially in nursing leadership.

45. Intake Screening

- a. Cermak shall maintain policies and procedures to ensure that adequate medical and mental health intake screenings are provided to all inmates.
- b. Cermak shall ensure that, upon admission to the Facility, Qualified Medical Staff or Licensed Correctional Medical Technicians utilize an appropriate medical intake screening instrument to identify and record observable and non-observable medical needs, shall assess and document the inmate's vital signs, and shall seek the inmate's cooperation to provide information, regarding:

- (1) medical, surgical and mental health history, including current or recent medications, including psychotropic medications;
 - (2) history and symptoms of chronic disease, including current blood sugar level for inmates reporting a history of diabetes;
 - (3) current injuries, illnesses, evidence of trauma, and vital signs, including recent alcohol and substance use;
 - (4) history of substance abuse and treatment;
 - (5) pregnancy;
 - (6) history and symptoms of communicable disease;
 - (7) suicide risk history; and
 - (8) history of mental illness and treatment, including medication and hospitalization.
- c. Cermak shall ensure that, upon admission to the Facility, Qualified Mental Health Staff, Qualified Medical Staff, or Licensed Correctional Medical Technicians utilize an appropriate mental health intake screening instrument to identify and record observable and non-observable mental health needs, and seek the inmate's cooperation to provide information, regarding:
- (1) past suicidal ideation and/or attempts;
 - (2) current ideation, threat or plan;
 - (3) prior mental illness treatment or hospitalization;
 - (4) recent significant loss, such as the death of a family member or close friend;

- (5) previously identified suicide risk during any prior confinement at CCDOC;
 - (6) any observations of the transporting officer, court, transferring agency or similar individuals regarding the inmate's potential suicide risk, if such information is communicated to Cermak staff;
 - (8) psychotropic medication history; and
 - (9) alcohol and other substance use and withdrawal history.
- d. Cermak shall ensure that all Qualified Mental Health Staff, Qualified Medical Staff or Licensed Correctional Medical Technicians who conduct the medical and mental health intake screenings are properly trained on the intake screening process, instrument, and the requirements and procedures for referring all qualifying inmates for further assessment.
 - e. If Cermak assigns Licensed Correctional Medical Technicians to perform intake screening, they shall receive appropriate, on-site supervision by on-site Qualified Medical Staff; information obtained on screening for all inmates will be reviewed by Qualified Medical Staff before the inmate departs the intake area.
 - f. Cermak shall ensure that a medical assessment based on the symptoms or problems identified during intake screening is performed within two working days of booking at the Facility, or sooner if clinically indicated, by a Qualified Medical Professional for any inmate who screens positively for any of the following conditions during the medical or mental health intake screenings:
 - (1) Past history and symptoms of any chronic disease included on a list specified by Cermak's policies and procedures;

- (2) Current or recent prescription medications and dosage, including psychotropic medications;
 - (3) Current injuries or evidence of trauma;
 - (4) Significantly abnormal vital signs, as defined by Cermak's policies and procedures;
 - (5) Risk of withdrawal from alcohol, opioid, benzodiazepine, or other substances;
 - (6) Pregnancy;
 - (7) Symptoms of communicable disease; and
 - (8) History of mental illness or treatment, including medication and/or hospitalization.
- g. Cermak shall ensure that any inmate who screens positively for mental illness or suicidal ideation during the intake process receives a comprehensive mental health evaluation (see provision 59.c, "Mental Health: Assessment and Treatment") Cermak shall ensure timely access to a Qualified Mental Health Professional for this purpose, based on emergent, urgent, and routine medical or mental health needs.
- h. Cermak shall ensure that the intake health screening information is incorporated into the inmate's medical record in a timely manner.
- i. Cermak shall implement a medication continuity system so that incoming inmates' medication for serious medical and mental needs can be obtained in a timely manner, as medically appropriate. Within 24 hours of an inmate's booking

at the Facility, or sooner if medically necessary, a Qualified Medical Professional or Qualified Mental Health Professional, with appropriate prescribing authority, shall decide whether to continue the same or comparable medication for serious medical and mental health needs that an inmate reports during intake screening that she or he has been prescribed. If the inmate's reported medication is discontinued or changed, other than minor dosage adjustments or substitution of a therapeutic equivalent, a Qualified Medical Professional or Qualified Mental Health Professional, with appropriate prescribing authority, shall evaluate the inmate face-to-face as soon as medically appropriate, and within no greater than five working days, and document the reason for the change.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such is no longer being formally monitored except for spot check monitoring as indicated.

Monitor's Findings:

Spot checking showed that this area remains in substantial compliance.

Monitor's Recommendations:

1. Cermak leadership should continue periodic CQI studies assessing the appropriateness, timeliness and quality of care.
2. The QI program should continue to monitor the documentation of timely receipt of medications that are deemed critical.

46. Emergency Care

- a. Cermak shall train health care staff to recognize and respond appropriately to health care emergencies, including:
 - (1) Medical emergencies;
 - (2) Mental health emergencies; and
 - (3) Drug and alcohol withdrawal.

- b. CCDOC shall train correctional officers to recognize and respond appropriately to health care emergencies, including:
 - (1) Medical emergencies;
 - (2) Mental health emergencies; and
 - (3) Drug and alcohol withdrawal.

- c. CCDOC shall ensure that all inmates with emergency health care needs receive prompt transport, including transport for outside care, for emergencies including:
 - (1) Medical emergencies; and
 - (2) Mental health emergencies.

- d. Cermak shall ensure that all inmates with emergency health care needs receive timely and appropriate care, with prompt referrals for outside care when medically necessary, and shall notify CCDOC when emergency transport is needed inside or outside the Facility compound, for emergencies including:
 - (1) Medical emergencies; and
 - (2) Mental health emergencies.

- e. CCDOC shall train all correctional officers to provide first responder assistance (including cardiopulmonary resuscitation (“CPR”) and addressing serious bleeding) in emergency situations. CCDOC shall provide all correctional officers with the necessary protective gear, including masks and gloves, to provide first line emergency response.

Compliance Status:

This provision remains in Substantial Compliance.

Status Update:

Received and reviewed.

Monitor’s Findings:

Cermak has a good training program for their healthcare staff to recognize and respond to healthcare emergencies.

CDOC provides training to the correctional officers to recognize and respond to healthcare emergencies.

Patients who need emergency health care are promptly identified and transported to the urgent care clinic and to the hospital if indicated. The Paramedics are now documenting directly in the electronic medical record. This is a new change since our last visit.

Nurses assess the patient and send them to the urgent care for further evaluation if needed. Nurses use a standard template that captures all relevant information. There is a warm handoff process between the floor nurse and the Urgent Care team.

The Physicians in the Urgent Care clinic are performing complete evaluations. They provide timely and appropriate care for their patients. Patients who need to be sent to outside hospital are transported timely.

Hypoglycemic events are continuing to be monitored by the quality program and targeted training is being performed.

Critical lab results are reviewed and addressed by the providers in a timely manner. This process is being monitored by the physician leadership for compliance.

Monitor's Recommendations:

1. Perform chart audits for Urgent Care visits to identify opportunities for improvement

47. Record Keeping

- a. Cermak shall ensure that medical and mental health records are adequate to assist in providing and managing the medical and mental health needs of inmates at the Facility and are maintained consistent with local, federal, and state medical records requirements.
- b. Cermak shall ensure that medical and mental health records are centralized, complete, accurate, readily accessible and systematically organized. All clinical encounters and reviews of inmates should be documented in the inmates' records.
- c. To ensure continuity of care, Cermak shall submit appropriate medical information to outside medical providers when inmates are sent out of the Facility for medical care. Cermak shall appropriately request records of care, reports, and diagnostic tests received during outside appointments in a timely fashion and include such records in the inmate's medical record or document the inmate's refusal to cooperate and release medical records.

- d. Cermak shall maintain unified medical and mental health records, including documentation of all clinical information regarding evaluation and treatment.

Compliance Status:

This provision remains in substantial compliance for more than 18 months.

Status Update:

All elements of record keeping remain in compliance for 18 months or longer.

Monitor's Findings:

There have been no lapses in compliance.

Monitor's Recommendations:

None.

48. Mortality Reviews

- a. Cermak shall request an autopsy, and related medical data, for every inmate who dies while in the custody of CCDOC, including inmates who die following transfer to a hospital or emergency room.
- b. Relevant CCDOC personnel shall participate in Cermak's mortality review for each inmate death while in custody, including inmates who die following transfer to a hospital or emergency room, and a morbidity review for all serious suicide attempts or other incidents in which an inmate was at high risk for death. Mortality and morbidity reviews shall seek to determine whether there was a systemic or specific problem that may have contributed to the incident. At a minimum, CCDOC's contribution to mortality and morbidity reviews shall include:

- I. Critical review and analysis of the correctional circumstances surrounding the incident;
 - II. Critical review of the correctional procedures relevant to the incident;
 - III. Synopsis of all relevant training received by involved correctional staff;
 - IV. Possible precipitating correctional factors leading to the incident; and
 - V. Recommendations, if any, for changes in correctional policy, training, physical plant, and operational procedures.
- c. Cermak shall conduct a mortality review for each inmate death while in custody, including inmates who die following transfer to a hospital or emergency room, and a morbidity review for all serious suicide attempts or other incidents in which an inmate was at high risk for death. Cermak shall engage relevant CCDOC personnel in mortality and morbidity reviews and shall seek to determine whether there was a pattern of symptoms that might have resulted in earlier diagnosis and intervention. Mortality and morbidity reviews shall occur within 30 days of the incident or death, and shall be revisited when the final autopsy results are available. At a minimum, the mortality and morbidity reviews shall include:
- I. Critical review and analysis of the circumstances surrounding the incident;
 - II. Critical review of the procedures relevant to the incident;
 - III. Synopsis of all relevant training received by involved staff;
 - IV. Pertinent medical and mental health services/reports involving the victim;
 - V. Possible precipitating factors leading to the incident; and
 - VI. Recommendations, if any, for changes in policy, training, physical plant, medical or mental health services, and operational procedures.

- d. Cermak shall address any problems identified during mortality and morbidity reviews through timely training, policy revision, and any other appropriate measures.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Status Update:

Received and reviewed.

Monitor's Findings:

There have been six death-in-custody cases since our last visit in November 2017 including one suicide. The mortality review/ root cause analysis (RCA) for all deaths in custody cases were reviewed by the Monitoring Team. We found the RCAs to be comprehensive and multidisciplinary with succinct action plan items. The suicide occurred in a detainee with no past psychiatric history and no identifiable suicide risk despite several documented encounters with behavioral health staff. The remaining death in custody cases were not considered to be preventable.

Monitor's Recommendations:

Continue to place focused attention on prevention of suicide deaths.

49. Grievances

Cermak shall develop and implement policies and procedures for appropriate handling of grievances relating to health care, when such grievances are forwarded from CCDOC.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot checking. Spot check was conducted.

Status Update:

None.

Monitor's Findings:

Spot check showed no lapses in compliance.

Monitor's Recommendations:

None.

C. MEDICAL CARE

50. Health Assessments

- a. Cermak shall ensure that Qualified Medical Professionals attempt to elicit the amount, frequency and time since the last dosage of medication from every inmate reporting that he or she is currently or recently on medication, including psychotropic medication.
- b. Cermak shall ensure that incoming inmates who present and are identified by medical personnel as having either a current risk of suicide or other acute mental health needs will be immediately referred for a mental health evaluation by a Qualified Mental Health Professional. Staff will constantly observe such inmates until they are seen by a Qualified Mental Health Professional or Qualified Mental Health Staff with appropriate, on-site supervision by a Qualified Mental Health Professional. Incoming inmates reporting these conditions will be housed in safe conditions unless and until a Mental Health Professional clears them for housing in a medical unit, segregation, or with the general population.

- c. Cermak shall ensure that all inmates at risk for, or demonstrating signs and symptoms of, drug and alcohol withdrawal are timely identified. Cermak shall provide appropriate treatment, housing, and medical supervision for inmates suffering from drug and alcohol withdrawal.
- d. CCDOC shall maintain a policy that correctional officers supervising newly arrived inmates physically observe the conduct and appearance of these inmates to determine whether they have a more immediate need for medical or mental health attention prior to or following the intake health screening by Qualified Medical Staff.
- e. Cermak shall ensure that the medical assessment performed within two working days of his or her booking at the Facility, or sooner if clinically indicated, for each inmate specified above (provision 45.f, "Intake Screening") shall include a review of the inmate's intake screening form, a medical history, a physical examination, a mental health history, and a current mental status examination. The physical examination shall be conducted by a Qualified Medical Professional. The medical assessment shall also include development or revision of the inmate's problem list and treatment plan to address issues identified during the medical assessment. Records documenting the assessment and results shall become part of each inmate's medical record. A re-admitted inmate or an inmate transferred from another facility who has received a documented medical assessment within the previous six months and whose receiving screening shows no change in the inmate's health status need not receive a new medical assessment. For such inmates, Qualified Medical Staff shall review prior records and update tests and examinations as needed.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot checking.

Monitor's Findings:

Spot checking showed that this area remains in substantial compliance.

Monitor's Recommendations:

3. Cermak leadership should continue periodic CQI studies assessing the appropriateness, timeliness and quality of care.
4. The QI program should continue to monitor the documentation of timely receipt of medications that are deemed critical.

51. Acute care

51a. Urgent Care

Cermak shall provide adequate and timely acute care for inmates with serious and life-threatening conditions, and ensure that such care adequately addresses the serious medical needs of inmates. Adequate care will include timely medical appointments and follow-up medical treatment.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Status Update:

Reviewed

Monitor's Findings:

This provision remains in substantial compliance.

Monitor's Recommendations:

None.

51b. Acute Care-Infirmarary

- a. Cermak shall maintain guidelines for the scope of care of acutely ill patients in its on-site designated infirmarary units and for transfer of patients when appropriate to outside hospitals.

Compliance Status:

This provision remains in Substantial Compliance

Status Update:

Received and reviewed.

Monitor's Findings:

Cermak has a strong Infirmarary program that manages higher acuity patients. Patients are appropriately referred to this program. Upon arrival to the unit, infirmarary nurse performs a full nursing assessment of the patients and develops a nursing care plan. The provider evaluates the patient and assign an acuity level.

Patients are followed up by the physician and the nurse based on their acuity level. The nurse sends the patient to the urgent care for any concerns during evenings and weekends.

The facility is clean and well maintained.

Monitor's Recommendations:

Continue to monitor performance metrics

52. Chronic Care

- a. Cermak shall maintain an appropriate, written chronic care disease management plan, which provides inmates with chronic diseases with timely and appropriate diagnosis, treatment, medication, monitoring and continuity of care consistent with the inmates' expected length of stay.
- b. Cermak shall maintain appropriate written clinical practice guidelines for chronic diseases, such as HIV, hypertension, diabetes, asthma and elevated blood lipids.
- c. Cermak shall maintain an updated registry to track all inmates with serious and/or chronic illnesses and shall monitor this registry to ensure that these inmates receive necessary diagnoses and treatment. Cermak shall keep records of all care provided to inmates diagnosed with chronic illnesses in the inmates' individual medical records.
- d. Cermak shall ensure that inmates with chronic conditions are routinely seen by a physician, physician assistant, or advanced practice nurse to evaluate the status of their health and the effectiveness of the medication administered for their chronic conditions.
- e. CCDOC shall house inmates with disabilities, or who need skilled nursing services or assistance with activities of daily living, in appropriate facilities, as determined by Cermak. CCDOC shall permit inmates with disabilities to retain appropriate aids to impairment, as determined by Cermak.
- f. Cermak shall ensure that inmates with disabilities or who need skilled nursing services or assistance with activities of daily living shall receive medically appropriate care. Cermak shall notify CCDOC of their specific needs for housing and aids to impairment.
- g. Cook County shall build out, remodel, or renovate clinical space as needed to provide appropriate facilities for inmates with disabilities in accordance with the timelines set out

in provision 43.i. Prior to completion of the new clinical space, Cook County and DFM will work with Cermak to address the most serious concerns regarding facilities for inmates with disabilities, to the extent possible in the current Facility.

Compliance Status:

This provision remains in Substantial Compliance

Status Update:

Received and reviewed.

Monitor's Findings:

The Monitoring Team reviewed the chronic care program and also the health records of randomly selected chronic disease patients.

Cermak maintains an appropriate, written chronic care disease management plan. The plan is comprehensive and helps guide the clinical staff. Patients with chronic diseases are seen timely and appropriate diagnosis, treatment and follow-up care are provided.

Cermak maintains appropriate written clinical practice guidelines for the major chronic diseases. The Power Notes and the order sets built in the electronic medical record enables the provider to easily follow the established clinical guidelines.

Cermak maintains an updated chronic disease registry to track all patients with chronic medical conditions. This registry is used on a daily basis to track individual patients and group of patients with specific health conditions.

Patients with chronic conditions are identified at Intake and referred to a provider immediately.

The provider evaluates the patient and starts them on treatment. Patients are sent to the appropriate housing location to ensure safety and continuity of care.

Appointments for follow-up care are scheduled by the scheduling team and tracked to ensure that the patients get seen. During the visit, the Providers address all aspects of care that includes compliance with medications, lab work, and referrals to specialists.

Patients with disabilities, or who need skilled nursing services are housed in locations as recommended by the providers. CCDOC allows patients with disabilities to retain appropriate aids to impairment, as ordered by the providers.

Patients with disabilities are housed in the appropriate housing units and are provided medically appropriate care. The facility is able to accommodate the needs of patients with disabilities.

Our review of 5 records of HIV patients showed that patients were timely medically screened and referred for a secondary health assessment. HIV providers also timely saw patients following their arrival. At the initial appointment, clinicians performed a history and physical examination and ordered labs in accordance with current guidelines, with the exception that, as noted at the last visit QuantiFeron testing was performed in 3 of 5 patients. Providers assessed patients' readiness to begin or restart antiretroviral therapy; and prophylaxis for opportunistic infections was initiated when clinically indicated. Medication administration Records (MAR's) showed that patients received continuity of antiretroviral medications and prophylaxis for opportunistic infections. At follow-up visits, HIV providers reviewed pertinent lab test results and counseled patients. Overall, we found HIV care to be excellent.

Monitor's Recommendations:

1. Continue established audits and reports to track performance.

53. Treatment and Management of Communicable Diseases

- a. Cermak shall maintain adequate testing, monitoring and treatment programs for management of communicable diseases, including tuberculosis (“TB”), skin infections, and sexually transmitted infections (“STIs”).
- b. CCDOC shall comply with infection control policies and procedures, as developed by Cermak, that address contact, blood borne, and airborne hazards, to prevent the spread of infections or communicable diseases, including TB, skin infections, and STIs, consistent with generally accepted correctional standards of care.
- c. Cermak shall maintain infection control policies and procedures that address contact, blood borne, and airborne hazards, to prevent the spread of infections or communicable diseases, including TB, skin infections and STIs, consistent with generally accepted correctional standards of care. Such policies should provide guidelines for identification, treatment and containment to prevent transmission of infectious diseases to staff or inmates.
- d. Pursuant to Centers for Disease Control (“CDC”) Guidelines, Cermak shall continue to test all inmates for TB upon booking at the Facility and shall follow up on test results as medically indicated. Cermak shall follow current CDC guidelines for management of inmates with TB infection, including providing prophylactic medication when medically appropriate and consistent with the inmate’s expected length of stay. Inmates who exhibit signs or symptoms consistent with TB shall be isolated from other inmates, evaluated for contagious TB and housed in an appropriate, specialized respiratory isolation (“negative pressure”) room. Cermak shall notify CCDOC of inmates’ specific housing requirements and precautions for transportation for the purpose of infection control.

- e. Cermak shall ensure that the negative pressure and ventilation systems function properly. Following CDC guidelines, Cermak shall test daily for rooms in-use and monthly for rooms not currently in-use. Cermak shall document results of such testing.
- f. Cermak shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting and ventilation problems.
- g. Cermak shall develop and implement adequate guidelines to ensure that inmates receive appropriate wound care. Such guidelines will include precautions to limit the possible spread of Methicillin-resistant Staphylococcus aureus (“MRSA”) and other communicable diseases.
- h. Cermak shall adequately maintain statistical information regarding communicable disease screening programs and other relevant statistical data necessary to adequately identify, treat, and control infectious diseases.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Status Update:

Status update received and reviewed.

Monitor’s Findings:

Spot checking showed no lapses in compliance.

Monitor’s Recommendations:

None.

54. Access to Health Care

- a. CCDOC will work with Cermak to facilitate timely and adequate accessibility of appropriate health care for inmates, as provided by Cermak.
- b. Cermak shall ensure the timely and adequate availability of appropriate health care for inmates.
- c. Cermak shall ensure that the medical request (“sick call”) process for inmates is adequate and provides inmates with adequate access to medical care. The sick call process shall include:
 - i. written medical and mental health care slips available in English, Spanish and other languages, as needed;
 - ii. opportunity for illiterate inmates and inmates who have physical or cognitive disabilities to access medical and mental health care; and
 - iii. opportunity for all inmates, irrespective of primary language, to access medical and mental health care.
- d. Cermak shall ensure that the sick call process includes confidential collection, logging and tracking of sick call requests seven days a week. Cermak shall ensure timely responses to sick call requests by Qualified Medical Staff. The logging procedure shall include documentation of the date and summary of each request for care, the date the inmate was seen, the name of the person who saw him or her, the disposition of the medical or mental health visit (e.g., referral; whether inmate scheduled for acute care visit), and, if follow-up care is necessary, the date and time of the inmate’s next appointment. Cermak shall document the reason for and disposition of the medical or mental health care request in the inmate’s medical record.

e. Cermak shall develop and implement an effective system for screening medical requests within 24 hours of submission. Cermak shall ensure that sick call requests are appropriately prioritized based upon the seriousness of the medical issue.

f. Cermak shall ensure that evaluation and treatment of inmates in response to a sick call request occurs in a clinical setting.

g. Cermak shall ensure that Qualified Medical Staff make daily rounds in the isolation areas to give inmates in isolation adequate opportunities to contact and discuss medical and mental health concerns with Qualified Medical Staff in a setting that affords as much privacy as reasonable security precautions will allow. During rounds, Qualified Medical Staff will assess inmates for new clinical findings, such as deterioration of the inmate's condition.

Compliance Status:

This provision remains in substantial compliance.

Status Update:

The Monitoring Team was provided and reviewed access to care data in preparation for the November 2017 Monitoring Tour.

Monitor's Findings:

The Monitoring Team evaluated inmate access to care by reviewing health service request tracking systems, health service request (HSR) forms and health records. In addition, Cermak health care leadership presented results of a new access to care database that tracked each health services request.

At the last monitoring visit in November 2017, all elements of Access to Care remained in substantial compliance. Substantial compliance was sustained for all access to care provisions at this monitoring visit.

The monitoring team reviewed a sample of approximately 110 health services requests (HSR) from all divisions submitted by inmates in March and April 2018, including dental requests.

We found that staff timely collected and signed HSRs upon receipt. Nurses timely triaged HSR's and legibly dated forms. Nurses consistently documented appropriate triage dispositions on the form. Nurses timely saw patients for both urgent and routine complaints. Nurses referred patients to providers as clinically indicated and appointments generally timely took place.

Nurses documented assessments into Cerner using nursing protocols using a Power Note that does not facilitate documentation of concise and pertinent notes and nurses do not acknowledge previous medical provider care pertinent to the patient's complaint that support nursing assessments. This contributes to variability in quality of nursing assessments. We also found instances in which nursing assessments are not consistent with Cermak Nursing Guidelines and/or good clinical judgement.

Compliance with the Agreed Order is further described below.

- a. Remains in substantial compliance.
- b. Remains in substantial compliance.
- c. Remained in substantial compliance.
- d. Remains in substantial compliance.
- e. Remains in substantial compliance.
- f. Remains in substantial compliance.

g. Remains in substantial compliance.

Recommendations:

1. Health care leadership should continue to provide physical assessment and nurse protocol training to nursing staff to increase their baseline knowledge and skills regarding the most common patient conditions.
2. Health care leadership should work to revise the Cerner Power Note to enable nurses to document more pertinent and concise notes, or use another type of form to document nursing assessments.
3. When patients submit HSRs, nurses should review the medical record to determine whether another nurse or medical provider has recently treated the patient for the same condition, and document this information in support of assessments and treatment plans.
4. Nurses should continue to assess all patients with dental pain and refer to dental in accordance with the urgency of the complaint.
5. Health care leadership and nurse managers should continue to perform CQI studies regarding nursing performance to provide feedback to nurses.

55. Follow-Up Care

- a. Cermak shall provide adequate care and maintain appropriate records for inmates who return to the Facility following hospitalization or outside emergency room visits.
- b. Cermak shall ensure that inmates who receive specialty, emergency room, or hospital care are evaluated upon their return to the Facility and that, at a minimum, discharge instructions are obtained, appropriate Qualified Medical Staff reviews the information and documentation available from the visit, this review and the outside provider's

documentation are recorded in the inmate's medical record, and appropriate follow-up is provided.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot checking.

Status Update:

Received and reviewed.

Monitor's Findings:

The Monitoring Team reviewed the process and the health records of patients returning from hospitalization and emergency room visits.

Cermak shares the same electronic medical record system with the hospital. The clinical staff have access to the emergency department, inpatient and specialty clinic documents. As a standard practice, the providers review the hospital records and use it to develop a treatment plan to ensure continuity of care.

Patients returning from the emergency room or hospital care are evaluated by a provider in the Urgent Care clinic. The provider reviews the hospital records and orders appropriate housing, medications and follow-up plan for the patient.

Monitor's Recommendations:

1. Continue with the established audits and reports.

56. Medication Administration

- a. Cermak shall ensure that treatment and administration of medication to inmates is implemented in accordance with generally accepted correctional standards of care.
- b. Cermak shall develop policies and procedures to ensure the accurate administration of medication and maintenance of medication records. Cermak shall provide a systematic physician review of the use of medication to ensure that each inmate's prescribed regimen continues to be appropriate and effective for his or her condition.
- c. Cermak shall ensure that medicine administration is hygienic, appropriate for the needs of inmates and is recorded concurrently with distribution.
- d. Cermak shall ensure that medication administration is performed by Qualified Nursing Staff.
- e. When Cermak prescribes medication to address an inmate's serious mental health needs, HIV or AIDS, or thromboembolic disease, Cermak shall alert CCDOC that the inmate in question is on a flagged medication. If the prescription is terminated during an inmate's stay at the Facility, Cermak will notify CCDOC.
- f. When CCDOC receives notice that an inmate is on a flagged medication, CCDOC shall include notation of a medication flag in the inmate's profile on the Facility's Jail Management System.
- g. When an inmate with a medication flag is processed for discharge at the Facility, CCDOC shall escort the inmate to designated Cermak staff in the intake screening area of the Facility for discharge medication instructions.
- h. When CCDOC escorts an inmate with a medication flag to Cermak staff during discharge processing, Cermak staff shall provide the inmate with printed instructions regarding prescription medication and community resources.

- i. Each morning, CCDOC shall provide Cermak with a list of all inmates with medication flags who were discharged the previous day.
- j. Within 24 hours of discharge of an inmate with a medication flag, Cermak shall call in an appropriate prescription to the designated pharmacy on the Stroger Hospital campus to serve as a bridge until inmates can arrange for continuity of care in the community.
- k. CCDOC shall ensure that information about pending transfers of inmates is communicated to Cermak as soon as it is available.
- l. When CCDOC has advance notice and alerts Cermak of the pending transfer to another correctional facility of inmates with serious medical or mental health needs from detention, Cermak shall supply sufficient medication for the period of transit. In such cases, Cermak shall prepare and send with transferring inmates a transfer summary detailing major health problems and listing current medications and dosages, as well as medication history while at the Facility.
- m. CCDOC shall ensure that the transfer summary and any other medical records provided by Cermak will accompany inmates, or will be made available electronically or transmitted by facsimile, when they are transferred from the Facility to another institution.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated.

Status Update:

Status update reviewed.

Monitor's Findings:

Spot checking showed no lapses in compliance.

Monitor's Recommendations:

None

57. Specialty Care

Cermak shall ensure that inmates whose serious medical or mental health needs extend beyond the services available at the Facility shall receive timely and appropriate referral for specialty care to appropriate medical or mental health care professionals qualified to meet their needs.

- a. Upon reasonable notification by Cermak, CCDOC will transport inmates who have been referred for outside specialty care to their appointments.
- b. Cermak shall ensure that inmates who have been referred for outside specialty care by the medical staff or another specialty care provider are scheduled for timely outside care appointments. Cermak shall provide reasonable notice to CCDOC of such appointments so that CCDOC can arrange transportation. Inmates waiting outside care shall be seen by Qualified Medical Staff as medically necessary, at clinically appropriate intervals, to evaluate the current urgency of the problem and respond as medically appropriate. If an inmate refuses treatment following transport for a scheduled appointment, Cermak shall have the inmate document his refusal in writing and include such documentation in the inmate's medical record.
- c. Cermak shall maintain a current log of all inmates who have been referred for outside specialty care, including the date of the referral, the date the appointment was scheduled, the date the appointment occurred, the reason for any missed or delayed appointments, and information on follow-up care, including the dates of any future appointments.

- d. Cermak shall ensure that pregnant inmates are provided adequate pre-natal care. Cermak shall develop and implement appropriate written policies and protocols for the treatment of pregnant inmates, including appropriate screening, treatment and management of high-risk pregnancies.

Compliance Status:

This provision remains in Substantial Compliance

Status Update:

Received and reviewed.

Monitor's Findings:

The Monitoring Team reviewed health records of patients returning from offsite specialty clinics and procedures.

Patients who require specialty clinic visits receive timely and appropriate referrals. The referrals are tracked by the referring provider and the coordinator. Urgent referrals are identified and processed more quickly.

The appointment list is reviewed by the physician leadership and given to the CCDOC team for transportation. Patients are taken to their appointment appropriately. The clinical team and the CCDOC team actively communicate and collaborate on this process. Patients waiting for outside care are continued to be monitored by the Medical Staff as medically necessary.

When patients refuse an offsite appointment, they are educated on the risk of refusal and the refusal is documented in the medical record.

Cermak maintains an active log of all offsite referrals. The status and the details of referrals are tracked in the log by the referral coordinator.

Cermak provides adequate pre-natal care for the pregnant patients. Cermak has a comprehensive program to appropriately screen and manage high-risk pregnancies.

Monitor's Recommendations:

1. Continue tracking referrals and monitor turnaround time for each clinic

58. Dental Care

Cermak shall ensure that inmates receive adequate dental care, and follow up, in accordance with generally accepted correctional standards of care. Such care should be provided in a timely manner, taking into consideration the acuity of the problem and the inmate's anticipated length of stay. Dental care shall not be limited to extractions.

- a. Cermak shall ensure that adequate dentist staffing and hours shall be provided to avoid unreasonable delays in dental care.

Compliance Status:

This provision remains in substantial compliance.

Status Update:

Received and reviewed on site.

Monitors' findings:

While Cermak census continues to decrease, the total number of dental encounters has remained stable over the past 18 months. Cermak dental now schedules 100% of all dental appointments.

Cermak now has two vacant dentist positions, the Chief Dentist and a front line dentist staff. This position is currently being recruited.

Oral surgery needs of the Cermak detainees are continued to be met via Stroger OMFS services.

Again, the Monitoring Team received from Cermak dental services a comprehensive self-assessment and process improvement plan that included action plan items and audit results for the past 6 months as well as encounter and quality improvement data for the past couple of years. Included in this document were monthly encounter numbers as well as a breakdown of extractions vs. restorative procedures. Cermak continues to perform a very high percentage of restorations vs. extractions. This is a best in class performance and has a significant positive impact on the oral health of the inmates at Cook County Jail and the overall oral health of the Cook County residents. The issue of inconsistent nursing evaluation of dental health services request forms has been eliminated. We found near 100% nurse encounters for every dental health service request form. This is to be commended. Similar to our last visits, the Monitoring Team audited several dental encounters from different Cermak Divisions with regard to:

- Date of actual HSR
- Date the HSR was received by dental clinic
- Date of dental clinic appointment
- Reason for visit (symptomatic vs. asymptomatic)
- Documentation regarding face to face nursing encounters when such encounter was indicated

The timeliness for the dental services for annual screening, routine and priority has remained acceptable (within 90 days, 30 days and 14 days respectively). The wait time for urgent dental complaints continues to surpass the goal of 3 business days and is currently around 7days. It is important to note, however, that all true urgent dental conditions were in fact evaluated by dental

services within 48 hours per our audit of dental health services request forms and the actual dental visits (majority were evaluated by the dentist within 24 hours). The Monitoring Team discovered that any and all dental health service request forms that mentions “pain” or “swelling” is automatically labeled as “urgent” regardless of the face to face nursing encounter that occurs prior to the dental appointment. This approach was at one time in the past necessary to avoid potential missed opportunities in the event that face to face nursing encounters would not occur. This is no longer the case. Our audit confirmed the overall self-assessment report with regard to nurse sick call encounters that was presented to the Monitoring Team by Cermak dental services indicating consistent and near 100% reliable nurse encounter for every dental health service request.

Monitor’s Recommendations:

1. Consider allowing nursing staff to suggest the acuity of dental health service request forms based on their face to face evaluation of detainees in order to decrease the number of false “urgent” appointments. This would in turn allow the dental service to focus more on truly urgent dental complaints. Further training of nursing staff on screening dental exams may be necessary.
2. Continue to recruit the vacant dentist position. The Monitoring Team hopes that the replacement of the currently vacant dentist positions will further enhance the dental services program at Cermak and reduce the overall wait times.

68. Suicide Prevention Training

- a. Cermak shall ensure that the Facility’s suicide prevention curriculum for health care staff members, jointly established with CCDOC, addresses the following topics:

- i. the suicide prevention policy as revised consistent with this Agreed Order;
 - ii. why facility environments may contribute to suicidal behavior;
 - iii. potential predisposing factors to suicide;
 - iv. high risk suicide periods;
 - v. warning signs and symptoms of suicidal behavior;
 - vi. observation techniques;
 - vii. searches of inmates who are placed on Suicide Precautions;
 - viii. case studies of recent suicides and serious suicide attempts (Serious suicide attempts are typically considered to be those that either were potentially life-threatening or that required medical attention);
 - ix. mock demonstrations regarding the proper response to a suicide attempt; and
 - x. The proper use of emergency equipment, including suicide cut-down tools.
- b. Within 24 months of the effective date of this Agreed Order, CCDOC shall train all CCDOC staff members who work with inmates on the Facility's suicide prevention program. Implementation of such training shall begin as soon as possible following the effective date of this Agreed Order. Staff shall demonstrate competency in the verbal and behavioral cues that indicate potential suicide, and how to respond appropriately. Initial and at least annual training shall be provided in accordance with generally accepted professional standards.
- c. Within 12 months of the effective date of this Agreed Order, Cermak shall train all Cermak staff members who work with inmates on the Facility's suicide prevention program. Implementation of such training shall begin as soon as possible following the effective date of this Agreed Order. Staff shall demonstrate competency in the verbal

and behavioral cues that indicate potential suicide, and how to respond appropriately.

Initial and at least annual training shall be provided in accordance with generally accepted professional standards.

Compliance Status:

This provision has remained in substantial compliance for 18 months or longer and as such will no longer be formally monitored except for spot check monitoring as indicated

Monitor's Findings:

There was one suicide death since our last monitoring visit. This event, however, occurred in a general population inmate with no warning signs.

Monitor's Recommendations:

Continue the annual training of Cermak and CCDOC staff with regard to suicide prevention.

86. Quality Management and Performance Measurement

- a. Defendants shall each develop and implement written quality management policies and procedures, in accordance with generally accepted correctional standards, to regularly assess, identify, and take all reasonable measures to assure compliance with each of the provisions of this Agreed Order applicable to that Defendant.
- b. Defendants shall each develop and implement policies to address and correct deficiencies that are uncovered during the course of quality management activities, including monitoring corrective actions over time to ensure sustained resolution, for each of the provisions of this Agreed Order applicable to that Defendant.
- c. CCDOC shall participate with Cermak and DFM in a jointly established Health Care Quality Improvement Committee, to be charged with developing and implementing a

joint quality improvement program. CCDOC shall contribute the time and effort of CCDOC staff members who, by virtue of their authority, current responsibilities, and/or past experience, can provide this committee with needed correctional representation.

- d. Cermak shall participate with CCDOC and DFM in a jointly established Health Care Quality Improvement Committee, to be charged with developing and implementing a joint quality improvement program. Cermak will work with CCDOC and DFM to identify those CCDOC and DFM staff members who, by virtue of their authority, current responsibilities, and/or past experience, can provide this committee with needed correctional representation. Quality management programs related to medical and mental health care will utilize performance measurements to assess quality of care and timely access to care with quantitative and qualitative data analysis and trending over time.
- e. DFM shall participate with CCDOC and Cermak in a jointly established Health Care Quality Improvement Committee, to be charged with developing and implementing a joint quality improvement program. DFM shall contribute the time and effort of DFM staff members who, by virtue of their authority, current responsibilities, and/or past experience, can provide this committee with needed correctional representation.

Compliance Status:

This provision remains in Substantial Compliance.

Status Update:

Received and reviewed.

Monitor's Findings:

Cermak maintains a written quality management policy and procedures in accordance with generally accepted correctional standards.

The quality program is comprehensive and tracks compliance with the requirements and established measures.

Cermak quality program identifies specific improvement activities and tracks their progress. The performance of each program and the status of the improvement activities are discussed during the monthly Quality meetings.

Cermak is a strong data driven program. They use several performance dashboards and real-time data to measure performance and track progress.

CCDOC and Cermak collaborate well and have joint meetings to discuss quality improvement initiatives.

Cermak has a culture of learning and continuous improvement.

Monitor's Recommendations:

1. Share your learnings and best practices with other organizations