

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

109



FROM: Riverside County Community Health Agency/Department of Public Health

SUBMITTAL DATE:
January 19, 2012

SUBJECT: Annual Local Detention Facility Inspection Reports 2011

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Receive and file the 2011 Annual Detention Facility Inspection Reports from the County Public Health Officer.

BACKGROUND: Per California Health & Safety Code, Section 101045, an annual inspection of the health and sanitary conditions at local detention facilities is conducted under the direction of the Public Health Officer. Copies of the inspection reports are required by law to be submitted to the Board of Supervisors. Each facility has been issued a copy of their respective report. The executive summary with individual reports has been forwarded to the California Department of Corrections and Rehabilitation for their review.

Overall, the facilities are in compliance with the state regulations.

VJB:

Susan D. Harrington

Susan D. Harrington,
Director of Public Health

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 0	In Current Year Budget:	N/A
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	N/A
	Annual Net County Cost:	\$ 0	For Fiscal Year:	N/A

SOURCE OF FUNDS: N/A	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Cournoyer*
Debra Cournoyer

County Executive Office Signature

- Policy
- Consent
- Policy
- Consent

Dep't Recomm.:
Per Exec. Ofc.:

Prev. Agn. Ref.: 7-13-2010 Item 2.7 | **District:** All | **Agenda Number:**

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD

2.3

**EXECUTIVE SUMMARY
OF DETENTION FACILITY INSPECTION
2011**

BACKGROUND AND ACTION

As mandated by California Health and Safety Code, Section 10145, local detention facilities must be inspected annually by a County Health Officer or local health department (Riverside County Community Health Agency, Department of Public Health). The Department of Public Health has determined that the most efficient method is to conduct "team inspections" of each facility. The inspection team includes a Registered Environmental Health Specialist, (REHS), a Public Health Nurse, and a Nutritionist. This annual re-inspection method is consistent with the established inter-departmental written protocol.

Each facility manager has been issued a copy of his / her respective report(s). The executive summary, individual reports and the abridged inspection report have been forwarded to the California Department of Corrections and Rehabilitation, as specified in the California Health and Safety Code, Section 10145, for review.

Environmental Evaluation Summary

Overall, only minor structural problems and kitchen deficiencies were noted in the report. As expected, new deficiencies arose due to the usage and aging of fixtures as well as some inmate induced problems; however, none of these new issues were serious. Indio Jail still has some plumbing problems as do the Robert Presley and Southwest County detention centers. We recommend that each facility continues to address maintenance problems as soon as they present themselves.

Nutrition Evaluation Summary

For Adult, Court Holding and Temporary Holding Facilities, there were no areas of non-compliance noted.

The Juvenile Halls corrected all areas of non-compliance noted in the 2010 inspections with respect to 1461 Minimum Diet, 1462 Therapeutic Diets and 1463 Menus. These corrections resulted from the facilities having secured a consulting Registered Dietitian (RD) and all five Juvenile Halls are now utilizing the same regular menu cycles. Recommendations have been made to decrease the fat content of menus by thirty percent and to clarify the process by which the consulting RD will communicate with Food Service Managers to ensure that Therapeutic Diets are provided when ordered and to review/approve menu substitutions per Title 15 requirements. We again recommend that these facilities continue to update and expand their Food Service Plans to make them site specific and to address, in more detail, the aspects of food service related to: a) safe food handling, b) initial and on-going staff trainings on safe food handling, c) emergency feeding plans, and d) communication and documentation of disciplinary and therapeutic diets prepared and served.

For Court Holding Facilities where food is served to inmates, we continue to encourage that these facilities maintain a written statement in their procedure manual that designates how and when food is transported and served to inmates at the court holding facility and who has what responsibility (jail staff vs. court holding facility staff). There is a concern that trays transferred to a court holding facility from a jail may end up being held for undesigned periods of time at room temperature.

Medical/Mental Health Evaluation Summary

Overall, Public Health Nurses provided inspection services to five Juvenile Hall facilities and 18 Adult Jail and Court Holding facilities. Indio Juvenile Hall inspection revealed one deficiency involving health care records and four recommendations regarding illegible signatures, procedure manuals, and expired over the counter medications. There were no deficiencies and two recommendations for Riverside Juvenile Hall regarding need for more record storage and keeping immunization records up to date. There were no deficiencies for Southwest Juvenile Hall and one recommendation regarding updating the policy manual. Twin Pines Ranch had no deficiencies or recommendations. Van Horn Youth Center had no deficiencies and two recommendations regarding the need for additional records storage and updating immunization records.

City Jails and Court Holding inspections revealed no deficiencies or recommendations for the Banning Sheriff's Substation Court Holding, Corona Court Holding, Desert Hot Springs Court Holding, Hemet Court Holding, Indio Court Holding, and Southwest Justice Center Court Holding facilities. The Blythe Court Holding facility had one deficiency regarding restraint procedure and two recommendations carried over from 2009 and 2010 regarding the need for revisions in policies and procedures. Blythe jail has one recommendation to update the "Use of Sobering Cell" procedure that was carried over from the 2009 and 2010 inspections. Cathedral City Jail had one recommendation to update first aid kits and Corona City Jail had one recommendation from 2010 regarding first aid kit inspections. Hemet City Jail had two recommendations regarding updating procedures for use of restraints and sobering cells. Indio Jail had three recommendations regarding the need for chart audits and reviewing manuals. Palm Springs City Jail had three recommendations regarding first aid kit inspections, maintenance, and obtaining a policy/procedure manual for the temporary holding cell. Both the Riverside Family Law Court and Riverside Hall of Justice were given recommendations to replace expired first aid kit items. Southwest County Detention Center had two recommendations regarding reviewing procedure manuals.

Multiple deficiencies and recommendations were noted for the two below mentioned facilities which the inspectors attributed to the decreased nursing staff. Robert Presley Detention Center had a total of five deficiencies and five recommendations. These deficiencies were related to erroneous health records with incorrect first name and same last names, missing RN signatures, incomplete charting, lack of lab work results, lack of follow up on inmates refusing medications and missing documentation of one RN license. Recommendations were suggested to correct these deficiencies. At the Smith Correctional Facility there were four deficiencies, a stated concern and one recommendation. These deficiencies included several months worth of documentation not filed which rendered the reviewer unable to conduct an accurate assessment,

review of procedures manual, 200+ sick call slips waiting for an RN for over a month and an unlocked medication cart. The concern of the reviewer was the decrease in nursing hours. The recommendation was to increase nursing hours in order to maintain compliance with State regulations and provide proper medical care and attention to inmates.

ABRIDGED INSPECTION REPORT 2011*

1.0 JUVENILE DETENTION FACILITIES

1.1 INDIO JUVENILE HALL

Environmental

During this inspection, one structural maintenance problem was noted as well as two deficiencies in the kitchen and recommendations were given.

Recommendations:

1. Repair broken sink in Unit #7 (left sink).
2. Re-finish all raw wood surfaces throughout kitchen and maintain them in a non-absorbent and sanitary manner.
3. Handles on the scoops inside the bulk containers should be facing upwards to avoid cross-contamination.

Nutrition

During this inspection, three recommendations were given and all recommendations from the previous year's inspection were corrected.

Recommendations:

1. Decrease fat content of regular menus to no more than 30% of calories per Title 15.
2. Increase calories on Therapeutic Menus to meet 1461 minimum diet requirements of 2200 – 2500 calories per day.
3. Keep log of sign in sheet for monthly in-services.

Corrections from previous year:

1. 1462 Therapeutic Diets: Diet manual approval is up to date for 2010. Approval for 2011 is pending signatures and Therapeutic Menus have been reviewed and approved by new Registered Dietitian.
2. 1463 Menus: Menus have been reviewed and approved by previous Registered Dietitian as of July 2010.

Medical/Mental Health

During this inspection, one deficiency was noted and five recommendations were given relating to policies/procedures and medications. In addition, one recommendation from the previous year's inspection was corrected.

Deficiency:

1. Health Care Records: 10 out of 10 medical charts reviewed had no legible signatures and there were no signature logs present at the time of the facility inspection. This deficiency is carried over from the 2010 inspection.

Recommendations:

1. Staff needs to ensure that signatures are legible on all medical documents.

2. Place the revised policy/procedures, which identify and meet the specific health needs of pregnant minors and mental health policies, into the manual.
3. Update and add Suicide and Prevention policy to the manual.
4. Assess medications for expiration dates according to facility protocol.

Corrections from last year:

1. Policy on Pregnant Minors, Mental Health Services and Transfer to a Treatment Facility has been revised.

1.2 RIVERSIDE JUVENILE HALL

Environmental

During this inspection, two kitchen deficiencies and two maintenance problems were noted and recommendations were given.

Recommendations:

1. Clean splatters of juice from the spouts of the juice machine.
2. Remove mold from inside of the large ice machine.
3. Repair the second urinal from the right in the gymnasium.
4. Repair the leak in the pipe chase between rooms 5 and 6 in Group 10.

Nutrition

During this inspection, three recommendations were given and three recommendations from the previous year's inspection were corrected.

Recommendations:

1. Decrease fat content of regular menus to no more than 30% of calories per Title 15.
2. Clarify process of how RD consults/communicates with Food Service Manager regarding provision of short term therapeutic diets.
3. Strongly encourage written menus for any therapeutic diets longer than a three day duration.

Corrections:

1. 1461 Minimum Diet: Menu now meets requirement for legumes.
2. 1462 Therapeutic Diets: Diet manual approval is up to date for 2010. Approval for 2011 is pending signatures. Facility has contracted w/ new RD for consultation in providing therapeutic diets.
3. 1463 Menus: Menus have been reviewed and approved by previous Registered Dietitian as of July 2010. Facility has contracted w/ new RD, menu review/approval and changes or substitutions will be submitted to her for approval.

Medical/Mental Health

During this inspection, no deficiencies were identified at this facility, although two recommendations were given.

Recommendations:

1. Additional storage for client's record is needed to be in compliance with HIPAA.
2. Input and keep immunization records current.

1.3 SOUTHWEST JUVENILE HALL

Environmental

During this inspection, five deficiencies were noted and recommendations were given.

Recommendations:

1. The hot water in Room 40 of Unit 3 needs to be fixed.
2. Replace mattresses and pillows that were found to have holes.
3. Clean mildew from the inside of the ice machine.
4. The handwashing station adjacent to the walk-in refrigerator must be repaired so that 100°F is provided under pressure for a minimum of 15 seconds.
5. Keep a food temperature log for each meal served.

Nutrition

During this inspection, three recommendations were given and three recommendations from the previous year's inspection were corrected.

Recommendations:

1. Decrease fat content of regular menus to no more than 30% of calories per Title 15.
2. Clarify process of how RD consults/communicates with Food Service Manager regarding provision of short term therapeutic diets.
3. Strongly encourage written menus for any therapeutic diets longer than three day duration.
4. Be sure menu changes are documented and kept on file and document communication with RD regarding review/approval of menu changes/substitutions per title 15.
5. Have policy manual on site during inspection and use log to document temperatures of food on tray line.

Corrections:

1. 1461 Minimum Diet – Menu meets Title 15 requirement for whole grains.

2. 1462 Therapeutic Diets: Diet manual RD/MD approval is up to date for 2010. Approval for 2011 is pending signatures and facility has contracted with new RD for consultation in providing therapeutic diets.
3. 1463 Menus: Menus have been reviewed and approved by previous RD as of July 2010. Facility has contracted with new RD, menu review/approval and changes or substitutions will be submitted to her for approval.

Medical/Mental Health

During this inspection, no deficiencies were identified at this facility, although one recommendation was given.

Recommendation:

1. Include reference in policies/procedures manual to the 1358 section in the probation manual which mentions a referral to the institutional nurse each time a minor is placed in the safety room.

1.4 TWIN PINES RANCH

Environmental

During this inspection, no deficiencies were identified at this facility.

Nutrition

During this inspection, one recommendation was given and one recommendation from the previous year's inspection was corrected.

Recommendations:

1. Designate one employee to have primary responsibility for kitchen/food service.

Corrections:

1. 1463 Menus: Facility is now using same menu as other Juvenile-type facilities. This menu was approved by previous RD through July 2011. Services of a new RD have been secured going forward.

Medical/Mental Health

During this inspection, no deficiencies were identified at this facility; the facility continues to meet all the Board of Corrections requirements.

1.5 VAN HORN YOUTH CENTER

Environmental

During this inspection, one deficiency was noted and a recommendation was given.

Recommendation:

1. Replace the mattress that has a hole and regularly check for holes in mattresses and pillows.

Nutrition

During this inspection, three recommendations were given and three recommendations from the previous year's inspection were corrected.

Recommendations:

1. Decrease fat content of regular menu to no more than 30% of calories per Title 15.
2. Clarify process of how RD consults/communicates with Food Service Manager regarding provision of short term therapeutic diets.
3. Strongly encourage written menus for any therapeutic diets longer than three day duration.

Corrections:

1. 1461 Minimum Diet: Menu now meets requirement for legumes.
3. 1462 Therapeutic Diets: Diet manual approval is up to date for 2010. Approval for 2011 is pending signatures and Therapeutic Menus have been reviewed and approved by new Registered Dietitian.
2. 1463 Menus: Menus have been reviewed and approved by previous Registered Dietitian as of July 2010. Facility has contracted w/ new RD, menu review/approval and changes or substitutions will be submitted to her for approval.

Medical/Mental Health

During this inspection, no deficiencies were identified at this facility, although two recommendations were given.

Recommendations:

1. Additional storage for client's record is needed to be in compliance with HIPAA.
2. Input and keep immunization records current.

2.0 ADULT DETENTION FACILITIES

2.1 BANNING COURT HOLDING

Environmental

During this inspection, no deficiencies were identified at this facility. The facility continues to meet all Title 15 CCR, "Minimum Standards for Local Detention Facilities" requirements.

Nutrition

During this inspection, no deficiencies were identified at this facility, although one recommendation was given.

Recommendation

1. Update and enforce procedures related to 1243 Food Service Manager. Food is transported to the court around 8:40 am and at 9:25 am during inspection a crate of food was found on the floor next to the refrigerator. There is a concern for possible food borne illness if foods are not stored at proper temperatures.

Medical/Mental Health

During this inspection, no deficiencies were identified at this facility; the 2010 recommendation that the first aid kit be inspected quarterly has been implemented.

2.2 BLYTHE BRANCH COURT

Environmental

During this inspection, one deficiency was noted and a recommendation was given.

Recommendation:

1. Replace the mattress that has a hole and regularly check for holes in mattresses and pillows.

Nutrition

During this inspection, no deficiencies were identified at this facility.

Medical/Mental Health

During this inspection, one deficiency was identified at this facility and two recommendations were carried over from previous years' inspections.

Deficiency:

1. The policy/procedure for restraints is missing information regarding signs and symptoms which would result in immediate medical/mental health referral; availability of CPR equipment; protective housing of restrained persons; provisions for hydration and sanitation needs and exercising of extremities. This deficiency continues from 2009 and 2010 inspections.

2009 and 2010 recommendations:

1. Revise the restraint policy/procedure to include the above mentioned information.
2. Include a cover sheet for the policy/procedure manual to include a signature page by the facility administrator.

2.3 BLYTHE JAIL

Environmental

During this inspection, one minor structural maintenance problem was noted and a recommendation was given.

Recommendation:

1. Replace ripped and torn mattresses.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although three recommendations were given.

Recommendations:

1. Not use "white out" on forms used for documentation.
2. Update policy related to 1247 Disciplinary Diets to include use of "Special Meals" form.
3. Update policies related to section 1243 Food Service Plan and to document staff training provided.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. Update procedure 1056 Use of Sobering Cell to discuss the handling of male and female inmates. Staff report they do differentiate between the sexes such as using privacy paper for the females on the windows. This recommendation was carried over from 2009 and 2010.

2.4 CATHEDRAL CITY JAIL

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. Update or purchase new first aid kit and develop a check list for monitoring contents and expiration date of all supplies. Contents should be checked on a regular basis and items that are used or become expired should be replaced promptly and noted on the check list.

2.5 CORONA CITY JAIL

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. Have quarterly first aid kit inspections and document in a log book.

2.6 CORONA COURT HOLDING

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. We continue our recommendation to expand the written memo describing food service under 1243 Food Service Plan to include handling the delivery of the sack lunches, including how a therapeutic sack lunch versus a regular sack lunch would be marked and who will be responsible for distribution.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility.

2.7 DESERT HOT SPRINGS CITY JAIL

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendations:

1. We continue our recommendations to update policies related to 1243 Food Service Plan to reflect that meals are now purchased from a variety of restaurants, not just Carl's Jr. and that description of meals to be purchased should be according to types of food (ie; fruit, salad, sandwich, etc) rather than specific names of foods associated with specific restaurants (ie; Charbroiled Chicken Sandwich is a specific type of sandwich offered at Carl's Jr.).

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility.

2.8 HEMET CITY JAIL

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although there was one recommendation given.

Recommendation:

1. Provide a bread/cereal product in addition to frozen meals per 1241 Minimum Diet under Title 15.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although there were two recommendations carried over from the previous year's inspection.

Recommendations from 2010:

1. 1058 Use of Restraints: The policy for the Pro-strait chair only lists the exercising of extremities. It does not list the other areas of the regulation such as when to refer to mental health, CPR equipment, hydration, etc. recommend consulting Title 15 to revise the current policy to include these items.
2. Update policy/procedure 1056 Use of Sobering Cell to include a comment section as to the state of consciousness of an impaired inmate such as snoring, sleeping, etc. The addition of an addendum section to note the state of conscious of an impaired inmate would be very important secondary documentation in the case of any possible litigation.

2.9 HEMET BRANCH COURT
(This facility is not currently being used)

Environmental

During this inspection, there were no deficiencies identified at this facility (items from last inspection were corrected).

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility.

2.10 INDIO JAIL

Environmental

During this inspection, twelve minor maintenance violations were noted. These violations concerned leaking pipes, the covering of vents, and ripped mattresses. See inspection report for details.

Recommendations:

1. Fix or replace soap dispenser in the kitchen restroom.
2. Provide a one inch air gap between the PVC drainage line and floor drain (for the steam table) in order to prevent potential back siphonage of waste water.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although three recommendations were given.

Recommendations:

1. Not use "white out" on forms used for documentation.

2. Have pertinent files on hand at site during inspection for review.
3. Update policies on 1243 Food Services Plan in regards to how and when food is transported to Court Holding Facility and policy on 1247 Disciplinary Diets to include use of the "Special Meal Form".

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although three recommendations were given.

Recommendations for this year and 2010 include:

1. Perform random chart audits to insure signatures are legible.
2. 1206 Health Care Procedures Manual should be reviewed and signed off at least annually.
3. Review Infection Control manual from RCRMC annually and incorporate a signature page.

2.11 INDIO LARSEN JUSTICE CENTER

Environmental

During this inspection, there was one structural maintenance problem identified at this facility and a recommendation was given.

Recommendations:

1. Pipe chase leaks in between rooms 7 & 8.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. Be sure all trays transported have lids to minimize potential for bacterial contamination. (Only 1 tray had a lid at inspection.)

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility. The facility continues to meet all the Board of Corrections requirements.

2.12 LARRY D. SMITH CORRECTIONAL FACILITY

Environmental

During this inspection, there were no deficiencies identified at this facility, although four recommendations were given.

Recommendations:

1. Provide sneeze guard for salad bar cart for staff.
2. Clean soda drink nozzle at dispenser for staff.
3. Store scoop handles above the top of the bulk dispenser.
4. Replace the old ice maker with a new one.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although there was one recommendation given.

Recommendations:

1. Develop a policy addressing the delineation of responsibilities between the jail transportation deputy who is responsible to deliver the sack lunches to the court holding facility, and the court holding deputy responsible for immediately storing the lunches in the onsite refrigeration.

Medical/Mental Health

During this inspection, there were four deficiencies identified at this facility and one recommendation was given.

Deficiencies:

1. Months of charting and documentation have not been filed due to lack of nursing staff and reviewer was unable to properly assess the charts.
2. Health care procedures manual has not been reviewed in over one year.
3. 200+ sick call slips were still waiting to be seen from 3/22/11. RNs are triaging as best as possible with nursing staff cuts.
4. One medication cart was found unlocked.

Recommendation:

1. This facility needs to hire more nursing/medical staff in order to maintain compliance with State regulations and to provide proper medical care and attention to the inmates.

Concern:

1. Within 1 year nursing care to the inmates has been decreased from 20 to 12 hours.

2.13 PALM SPRINGS CITY JAIL

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given. (Facility has changed from a type I to Temporary Holding.)

Recommendation:

1. Revise existing policies to reflect Temporary Holding requirements and actual food service provided. Facility is still using policy/procedure manual for Type I facility.

Medical/Mental Health:

During this inspection, there were no deficiencies identified at this facility, although three recommendations were given.

Recommendations:

1. As per 2009 and 2010, keep records of first aid kit inspections completed by Cintas in a 3 ring binder.
2. Contact Cintas Company for restocking and maintenance of first aid kit.
3. Obtain a policy and procedure manual appropriate for utilization in a Temporary Holding Cell Facility.

**2.14 RIVERSIDE SUPERIOR COURTS
FAMILY LAW COURT HOLDING FACILITY**

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, one deficiency was identified at this facility and one recommendation was given.

Deficiency:

1. Expired first aid kit items.

Recommendation:

1. Replace first aid kit items.

2.15 RIVERSIDE HALL OF JUSTICE

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, one deficiency was identified at this facility and one recommendation was given.

Deficiency:

1. Expired first aid kit items.

Recommendation:

1. Replace first aid kit items.

2.16 ROBERT PRESLEY DETENTION CENTER

Environmental

During this inspection, 25 minor plumbing and structural repairs (ranging from leaking pipes, valves, and blocked vents by inmates, to ripped mattress) were noted in the report.

The following recommendations are for the kitchen:

1. Store all pots and pans upside down when not in use.
2. Inspect refrigerator floors for food and other debris daily.
3. The floors in certain areas have excessive chipping paint and should be repainted / repaired.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health:

During this inspection, five deficiencies regarding 1205 Health Care Records were identified at this facility and five recommendations were given.

1. Health care requests not signed by RN, missing MARs, mixed up records with same last name but different inmate first name.
2. Incomplete SOAP charting (RNs), lab work orders with no results in chart for long periods of time.
3. Inconsistent charting progress notes during this audit process.
4. Inmates' medication refusals not documented or followed up by RN with MD.
5. An RN license was missing in record list at the time of audit.

Recommendations Include:

1. Charting needs to be coherent with the care provided (i.e., SOAP notes).
2. A follow-up plan is needed when patient refuse care/ medications.
3. Peer review (monthly) and chart audits (quarterly).
4. Name alert system for inmates with same last names.

5. Maintain RN licenses records up to date.

2.17 SOUTHWEST COUNTY DETENTION CENTER

Environmental

During this inspection, seven minor plumbing and structural problems (ranging from leaking pipes and valves to ripped mattress) were noted in the report. Some of these deficiencies were noted last year and are still not repaired. Four recommendations were given.

Recommendations:

1. Repair pipe-chase leak between cells 42 & 44 of Housing Unit G Dayroom #2.

Kitchen:

1. Provide caulking for the 2 and 3 compartment sinks between the sink and back wall.
2. Provide a 1" air gap between the pipe and floor sink from the ice machine.
3. Prevent future water overflowing from the ice machine into the staff bathroom.

Nutrition

During this inspection, there were no deficiencies identified at this facility, although two recommendations were given.

Recommendations:

1. Develop procedure for transportation and service of trays prepared for court holding facility, to include time frames for transportation and description of how they are transported and held.
2. It is recommended that "Meal Tracking" form be stored for two years, same as a medical document.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although three recommendations were given.

Recommendations:

1. 1206 Health Care Procedures Manual. The RN protocols manual was last reviewed 3/09. The manual should be reviewed and signed off at least on an annual basis.
2. The infection control manual from RCRMC is utilized at DHS facilities and was last reviewed 8/17/08. Although DHS is not directly responsible for the manual, they should discuss with RCRMC to see whether the manual is reviewed annually and if so to include the signature page with the manual.
3. Continue to maintain the quality of operations with adequate amount of staffing.

2.18 SOUTHWEST COUNTY MUNICIPAL COURT HOLDING

Environmental

During this inspection, there were no deficiencies identified at this facility.

Nutrition

During this inspection, there were no deficiencies identified at this facility.

Medical/Mental Health

During this inspection, there were no deficiencies identified at this facility, although one recommendation was given.

Recommendation:

1. Continue to maintain the quality of operations with adequate amount of staffing.

INSPECTION TEAM COORDINATORS:

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