

Pinal County - Managing For Results

Annual Report

FY 2009-2010

CORRECTIONAL HEALTH

Employee Health Services

Employee Health Services Activity

KR % of Correctional Health Employees will receive the required TB test within 7 days of employment and yearly thereafter

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
100.00%	0.00%	100.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

This measure did not provide beneficial information and will be reconsidered. All employees who work in a health care setting are required to have a TB test. They will not be allowed to work without it.

Health Services

Doctor/Nurse Practitioner Activity

KR % of individuals with an identified mental health condition will maintain or improve* their mental health status as determined by a psychiatric evaluation

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate						
75.00%	94.05%	75.00%	92.00%	75.00%	93.58%	89.75%	96.08%	96.00%	96.08%	96.00%

In review of the year, the data collected provided useful information. We will continue to identify, treat, and follow inmates who have mental health conditions during their incarceration.

KR % of individuals with identified chronic care conditions will maintain healthy indicators* established by the governing medical communities (i.e. - National Commission on Correctional Health Care.)

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate						
75.00%	74.55%	75.00%	88.89%	75.00%	79.81%	87.40%	98.78%	99.00%	98.78%	99.00%

In review of the year, the data collected provided useful information. We will continue to identify, treat, and monitor individuals with chronic care condition(s).

Mental Health Team Activity

KR % of mental health responses to request** for services occur within 3 clinic days of request

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
100.00%	100.00%	100.00%	100.00%	100.00%	95.60%	100.00%	100.00%	100.00%	98.74%	100.00%

In review of the year, we were able to meet the 3 day requirement. Monitoring this measure provided useful information and helped to develop a means to consistently meet the 3 day deadline.

Nursing Team Activity

KR % of adult population will receive the 14-Day Health Assessment

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
90.00%	182.91%	100.00%	115.33%	100.00%	83.95%	110.00%	53.52%	89.00%	53.52%	89.00%

In review of the year, issues impacting our ability to perform assessments daily included: exam room availability, and staffing. Two measures we have taken to assist are: more RN's have been scheduled on the weekend in order to take advantage of exam room availability and there is a Language Line available when the patient is non-English speaking. It is anticipated these two measures will assist us in meeting our goal of 100%.

CORRECTIONAL HEALTH

Quality Assurance

Quality Assurance Activity

KR % reduction in the rate of medical grievances filed by inmates

	Q1		Q2		Q3		Q4		FY10 YTD	
FY10 Target	Actual	YE Estimate	Actual	YE Estimate						
10.00%	0.00%	10.00%	0.00%	10.00%	0.00%	10.00%	0.00%	0.00%	0.00%	0.00%

This fiscal year a revised Inmate Medical Grievance Policy and Procedure was implemented. The number of grievances at the beginning of the fiscal year does not reflect this new process. Collaboration between Detention and Medical Staff bridged communication for the inmate. The procedure is designed to address inmate's medical complaints. Inmates have the right to grieve, and this right in no way compromises their access or the quality of health services. Informal and Formal Medical Inmate Grievances are defined as: Informal Grievances are addressed by the nursing staff and efforts are made to provide resolution, if the inmate is unsatisfied with the informal resolution, they can proceed with the Formal Medical Grievance two level process of appeals in an attempt for resolution. More time is required to collect sufficient data to present Formal Grievance numbers.

Administrative

Department Director

KR % of applicable Key Results achieved

	Q1		Q2		Q3		Q4		FY10 YTD	
FY10 Target	Actual	YE Estimate	Actual	YE Estimate						
100.00%	88.89%	89.00%	88.89%	89.00%	60.00%	67.00%	88.89%	89.00%	88.89%	89.00%

The 2009-10 fiscal year was a challenge for Correctional Health Services staff. Some quarters we achieved many of the key results, but we also experienced small failures, which inspired us to take a closer look at our operations.

During the year, we consistently met the Employee Health Services, Human Resources, Record Management, Financial Services and Training Key Results. We did not track the Key Results relating to Vehicle Management--Correctional Health wasn't issued a County vehicle.

Over the past year, we exceeded the annual target for the Doctor/Nurse Practitioner, Medical and Mental Health Activities. This success is credited to the staff's dedication in caring for inmates with a medical and mental health condition. During the 1st quarter, the team struggled with not having sufficient staff. Cross training staff and providing additional training, we were able to improve patient services.

The Mental Health Team Activity had issues within the 3rd quarter. In March, we didn't meet our goals. Staffing limitations and an unexpected influx of requests for mental health services contributed to not meeting the expected goals. We could not identify why we had an influx of requests during March. Usually an influx of mental health assistance requests occur during the holiday season. Because we did not see a pattern and did not have a significant increase in population, this may have been a one time occurrence. Not meeting the goal in March impacted the annual results and we did not meet the anticipated target.

Health Services --The Nursing Team continues to struggle and has not met the expected goal. There were several factors that contributed to the department not meeting the goal. In August, we received new guidelines from the Arizona County Jails Association which mandated that 100% of the 14 Day Health Assessments are to be completed within 14 days of the Inmate's arrival, as opposed to 90%. In September, we noticed that we had to adjust the calculation to reflect the "total number of inmates with a stay of 14 days or greater" as the denominator, and not "the # of new inmates". In January 2010, the Detention Facility entered into a contract with the US Marshals and added approximately 200 inmates to the facility --mostly Spanish speaking. This created an additional staffing difficulty since we do not have Spanish speaking RNs. Utilizing clerical, LPNs, and the Language Line was very time consuming and inefficient for real time translations. The 14 Day Health Assessment must be completed by a RN or a Practitioner. Several RNs were on leave and the department couldn't utilize LPNs. In addition, we were dealing with limited space, as well as officer availability. Until these issues are resolved, it will be very difficult to achieve a consistent compliance of the goal. We will work to improve this measure.

The Quality Assurance Activity -- During the 3rd quarter, a revised Grievance Policy and Procedure went into effect. The revised policy and procedure defined a Informal and Formal Medical Grievance process. This improved communication between the Inmate and Medical Staff attempt to resolve inmate's medical/mental health concerns in a timely manner. In view of this new Policy and Procedure Inmate Informal Medical Grievance are resolved and Formal Medical Grievance are being counted. This may be an annual measure as more time is required to show actual data. During the 4th quarter we didn't receive any medical grievances.

The Department Director Activity -- Patient Survey result exceeded the annual set target. The survey is similar to getting a report card. The survey results highlighted strong performance in the key areas, including courtesy and communication of medical providers and nurses. Employee team work is behind our success. Their efforts ensure that our patients receive quality care in a courteous and compassionate environment. The reports prepared for the department provided a reliable basis for both positive and constructive feedback to all staff working in Correctional Health Services.

Going through one year of this process had its ups and downs. We are still in the learning process and will possibly encounter different challenges within the next fiscal year. We are focused on resolving some of our challenges, which will improve our operations.

CORRECTIONAL HEALTH

Administrative

Department Director

KR % of surveyed customers who say they are satisfied or very satisfied with the services provided by the department

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
75.00%	100.00%	100.00%	100.00%	100.00%	90.91%	100.00%	90.19%	90.00%	90.19%	90.00%

Correctional Health Services strives to provide quality health care to the population we serve. We asked the inmates to rate our performance. 268 surveys were given and 268 were returned, 242 in English and 26 in Spanish. Three out of the 268 surveys returned were disregarded due to incompleteness of the major measurement ratings.

Survey results highlighted strong performance in the key areas, including the courtesy and communication of medical providers and nurses, and compassionate, reassuring attitudes of all staff. They used a rating scale of Very Satisfied, Somewhat Satisfied, Undecided, Somewhat Dissatisfied, Satisfied and Very Dissatisfied. Overall, 89.7 % were very satisfied or satisfied with the services they received.

We strive to be the best we can, and we compare ourselves with others in our profession to achieve the highest standards with our work by "Providing Quality Health Care to our population" in a courteous and compassionate environment.

Financial Services

KR % of non-construction payment authorizations (purchase orders) entered into the system within three business days of receipt of goods

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate						
90.00%	100.00%	90.00%	100.00%	90.00%	100.00%	90.00%	100.00%	100.00%	100.00%	100.00%

Throughout the fiscal year, Correctional Health has met or exceeded the annual target set by the County. This has been primarily due to improved communication between Sheriff Office's Loading Dock Personnel and Correctional Health Administrative staff.

Human Resources

KR % of all annual employee appraisals will be submitted to Human Resources by the end of January due date.

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
98.00%	0.00%	98.00%	0.00%	98.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%

All annual appraisals for the fiscal year 2009/10 were submitted in January 2010.

Records Management

KR % of record series managed in compliance with legal and policy requirements as determined by the Arizona State Library of Archives.

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
100.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

At the beginning of the fiscal year, the Annual Target was set at 301. This number represented the actual number of physical records. In August, the County redefined the Records Management Activity--clarifying the definition of records. From September to November, Correctional Health did a records inventory; consulted with the State Library of Archives and determined the department had 3 record series to be managed--Clinical (patient-related records), Financial and Administrative. In March 2010, it was decided to make the Records Activity an annual measure. Correctional Health has been in compliance with legal and policy requirements for records.

Training

KR % of training dollars spent that directly align to County or Department strategic goals.

FY10 Target	Q1		Q2		Q3		Q4		FY10 YTD	
	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate	Actual	YE Estimate
85.00%	0.00%		0.00%	85.00%	0.00%	85.00%	100.00%	100.00%	100.00%	100.00%

The annual target was set at 85% of training dollars spent directly aligned with County or Department goals. Correctional Health's Current Year End Estimate was 100%. The Department's goal was to exceed the County's expected goal of 85%. Given the budgetary constraints, Correctional Health was particularly diligent in researching training to be sure that the sessions aligned with Department and County goals.

CORRECTIONAL HEALTH

Administrative

Vehicle Management

KR % of department vehicles operated more than 10,000 miles per year

	Q1		Q2		Q3		Q4		FY10 YTD		
FY10 Target	Actual	YE Estimate	Actual	YE Estimate							
95.00%	0.00%		0.00%	95.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%

This department does not operate a county vehicle.

KR % of department vehicles with preventative maintenance performed as scheduled

	Q1		Q2		Q3		Q4		FY10 YTD		
FY10 Target	Actual	YE Estimate	Actual	YE Estimate							
95.00%	0.00%		0.00%	95.00%	0.00%		0.00%	0.00%	0.00%	0.00%	0.00%

N/A