



County of Allegheny

Office of the Controller

EXAMINATION REPORT ON
CORIZON HEALTH, INC.'S COMPLIANCE WITH
CONTRACT #153946 WITH ALLEGHENY COUNTY
FOR THE PERIOD SEPTEMBER 1, 2013
THROUGH FEBRUARY 28, 2014

December 15, 2014

Chelsa Wagner
Controller

104 County Courthouse
436 Grant Street
Pittsburgh, PA 15219
Phone: (412) 350-4660
Fax: (412) 350-4770

E-mail: Controller@alleghenycounty.us

Contents

Independent Accountant's Report	1
Introduction	5
Schedule of Findings and Responses	
Finding #1: The Jail's Monitoring and Enforcement of Contract #153946 Has Not Been Sufficient	7
Finding #2: The Allegheny County Jail is No Longer Accredited by the <i>National Commission on Correctional Health Care</i> , Corizon Has Not Complied with Reporting Requirements, and Corizon Should Be Penalized for Failures to Meet Performance Standards	9
Finding #3: Corizon Has Not Maintained the Required Staffing Levels	14
Finding #4: Corizon Has Not Maintained Complete and Accurate Inmate Medical Records and Has Not Begun Implementing Electronic Medical Records as Required	17
Finding #5: Corizon Could Not Produce Documentation to Evidence That Intake Health Assessments Were Conducted for Newly-Admitted Jail Inmates as Required	21
Finding #6: Corizon Has Not Provided Inmates with Required Clinical Care	24
Finding #7: Corizon Did Not Comply With Pharmacy Management Requirements	27
Finding #8: Corizon Has Not Ensured the Readiness of Emergency Equipment and Supplies	30
Finding #9: Corizon Could Not Produce Documentation to Evidence Pre-Placement Health Assessments and Medical and Mental Health Rounds Were Performed for Inmates in Segregation	32
Finding #10: Corizon Could Not Produce Documentary Evidence to Demonstrate That an Appropriate Triage Process Was Used to Prioritize Inmate Sick Call Requests	34
Finding #11: Corizon Has Not Responded to Inmate Medical Grievances Timely	37
Finding #12: Corizon Has Delayed the Assignment of Inmates to Alternative Housing	40
Finding #13: Corizon Has Not Provided Inmates with Required Re-Entry Services	42
Finding #14: Corizon and the Jail Appear to Have Engaged in Unfair Labor Practices	45
Response from the Chief Operating Officer / Northeast Region of Corizon Health, Inc.	47
Response from the Warden of the Allegheny County Jail	62



CHELSEA WAGNER
CONTROLLER

COUNTY OF ALLEGHENY

OFFICE OF THE CONTROLLER

104 COURTHOUSE • 436 GRANT STREET
PITTSBURGH, PA 15219-2498
PHONE (412) 350-4660 • FAX (412) 350-3006

December 3, 2014

Dr. Woodrow A. Myers, Jr.
Chief Executive Officer
Corizon Health, Inc.
103 Powell Court
Brentwood, TN 37027

Mr. Orlando Harper
Warden
Allegheny County Jail
950 Second Avenue
Pittsburgh, PA 15219

SUBJECT: INDEPENDENT ACCOUNTANT'S REPORT

Dear Dr. Myers and Warden Harper:

We have examined Corizon Health, Inc.'s (Corizon's) compliance with the requirements of its contract #153946 with Allegheny County during the period September 1, 2013 through February 28, 2014. Management is responsible for Corizon's compliance with those requirements. Our responsibility is to express an opinion on Corizon's compliance based on our examination.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants and the standards applicable to attestations contained in *Government Auditing Standards* issued by the Comptroller General of the United States and, accordingly, included examining, on a test basis, evidence about Corizon's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our examination provides a reasonable basis for our opinion. Our examination does not provide a legal determination on Corizon's compliance with specified requirements.

Our examination disclosed the following material noncompliance with the requirements of contract #153946 applicable to Corizon during the period September 1, 2013 through February 28, 2014 which is described in further detail in the accompanying Schedule of Findings and Responses:

- The Jail's Monitoring and Enforcement of Contract# 153946 Has Not Been Sufficient (Finding #1)
- The Allegheny County Jail is No Longer Accredited by the *National Commission on Correctional Health Care*, Corizon Has Not Complied with Reporting Requirements, and Corizon Should Be Penalized for Failures to Meet Performance Standards (Finding #2)
- Corizon Has Not Maintained the Required Staffing Levels (Finding #3)
- Corizon Has Not Maintained Complete and Accurate Inmate Medical Records and Has Not Begun Implementing Electronic Medical Records as Required (Finding #4)

- Corizon Could Not Produce Documentation to Evidence That Intake Health Assessments Were Conducted for Newly-Admitted Jail Inmates as Required (Finding #5)
- Corizon Has Not Provided Inmates with Required Clinical Care (Finding #6)
- Corizon Did Not Comply With Pharmacy Management Requirements (Finding #7)
- Corizon Has Not Ensured the Readiness of Emergency Equipment and Supplies (Finding #8)
- Corizon Could Not Produce Documentation to Evidence Pre-Placement Health Assessments and Medical and Mental Health Rounds Were Performed for Inmates in Segregation (Finding #9)
- Corizon Could Not Produce Documentary Evidence to Demonstrate that an Appropriate Triage Process Was Used to Prioritize Inmate Sick Call Requests (Finding #10)
- Corizon Has Not Responded to Inmate Medical Grievances Timely (Finding #11)
- Corizon Has Not Provided Inmates with Required Re-Entry Services (Finding #13)
- Corizon and the Jail Appear to Have Engaged in Unfair Labor Practices (Finding #14)

In our opinion, because of the effect of the noncompliance described in the third paragraph, Corizon has not complied with the aforementioned requirements for the period September 1, 2013 through February 28, 2014.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with applicable compliance requirements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that material noncompliance with applicable compliance requirements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

In accordance with *Government Auditing Standards*, we are required to report all deficiencies that are considered to be significant deficiencies or material weaknesses in internal control; fraud and noncompliance with provisions of laws or regulations that have a material effect on Corizon's compliance with the requirements of contract #153946; and any other instances that warrant the attention of those charged with governance; noncompliance with provisions of contracts or grant agreements, and abuse that has a material effect on the subject matter. We are also required to obtain and report the views of responsible officials concerning the findings, conclusions, and recommendations, as well as any planned corrective actions. We performed our examination to express an opinion on whether Corizon complied in all material respects with the requirements of contract #153946 and not for the purpose of expressing an opinion on the internal control over compliance or on compliance (except for Corizon's compliance with the requirements of contract #153946) and other matters; accordingly, we express no such opinions. Our examination disclosed material weaknesses and a significant deficiency in internal control that are required to be reported under *Government Auditing Standards* and those findings, along with the views of responsible officials, are described in the accompanying Schedule of Findings and Responses. The material weaknesses are described in the following findings:

Dr. Myers and Warden Harper
December 3, 2014

- The Jail's Monitoring and Enforcement of Contract# 153946 Has Not Been Sufficient (Finding #1)
- The Allegheny County Jail is No Longer Accredited by the *National Commission on Correctional Health Care*, Corizon Has Not Complied with Reporting Requirements, and Corizon Should Be Penalized for Failures to Meet Performance Standards (Finding #2)
- Corizon Has Not Maintained the Required Staffing Levels (Finding #3)
- Corizon Has Not Maintained Complete and Accurate Inmate Medical Records and Has Not Begun Implementing Electronic Medical Records as Required (Finding #4)
- Corizon Could Not Produce Documentation to Evidence That Intake Health Assessments Were Conducted for Newly-Admitted Jail Inmates as Required (Finding #5)
- Corizon Has Not Provided Inmates with Required Clinical Care (Finding #6)
- Corizon Did Not Comply With Pharmacy Management Requirements (Finding #7)
- Corizon Has Not Ensured the Readiness of Emergency Equipment and Supplies (Finding #8)
- Corizon Could Not Produce Documentation to Evidence Pre-Placement Health Assessments and Medical and Mental Health Rounds Were Performed for Inmates in Segregation (Finding #9)
- Corizon Could Not Produce Documentary Evidence to Demonstrate that an Appropriate Triage Process Was Used to Prioritize Inmate Sick Call Requests (Finding #10)
- Corizon Has Not Responded to Inmate Medical Grievances Timely (Finding #11)
- Corizon Has Not Provided Inmates with Required Re-Entry Services (Finding #13)

The significant deficiency is described in the following finding:

- Corizon Has Delayed the Assignment of Inmates to Alternative Housing (Finding #12)

We also identified a type II subsequent event (it occurred subsequent to the period to which we applied our procedures but before the date of our report) that in our judgment requires disclosure (See Finding #4 in the accompanying Schedule of Findings and Responses).

This report is intended solely for the information and use of Corizon and Allegheny County and is not intended to be and should not be used by anyone other than these specified parties.

Kind regards,



Chelsa Wagner
Controller



Lori Churilla
Assistant Deputy Controller, Auditing

Dr. Myers and Warden Harper
December 3, 2014

cc: Honorable John DeFazio, President, County Council
Honorable Nicholas Futules, Vice President, County Council
Honorable Rich Fitzgerald, County Executive
Mr. William McKain, County Manager, Allegheny County
Ms. Jennifer Liptak, Chief of Staff, County Executive
Mr. Warren Finkel, Budget Director, Allegheny County
Mr. Joseph Catanese, Director of Constituent Services, County Council
Mr. Walter Szymanski, Budget Director, County Council
Honorable Donna Jo McDaniel, President, Allegheny County Jail Oversight Board
Ms. Nadia Lazo, Member, Allegheny County Jail Oversight Board
Ms. Gayle Moss, Member, Allegheny County Jail Oversight Board
Honorable Sheriff William Mullen, Member, Allegheny County Jail Oversight Board
Dr. Claire Walker, Member, Allegheny County Jail Oversight Board
Honorable Joseph Williams, Member, Allegheny County Jail Oversight Board
Dr. Karen Hacker, Director, Allegheny County Health Department
Dr. Lee Harrison, Chair, Allegheny County Board of Health
Mr. William Youngblood, Vice-Chair, Allegheny County Board of Health
Dr. Donald Burke, Member, Allegheny County Board of Health
Ms. Joan Cleary, Member, Allegheny County Board of Health
Mr. Anthony Ferraro, Member, Allegheny County Board of Health
Dr. Kotayya Kondaveeti, Member, Allegheny County Board of Health
Dr. Joylette Portlock, Member, Allegheny County Board of Health
Dr. Edith Shapira, Member, Allegheny County Board of Health
Dr. Ellen Stewart, Member, Allegheny County Board of Health

Introduction

The Allegheny County Jail is located at 950 Second Avenue in the City of Pittsburgh. In 2013, the Jail housed approximately 2,705 inmates on any given day and operated with a budget of approximately \$71 million. Inmates at the Jail are housed in 35 living units (“pods”) and each standard pod has 56 cells on two levels. Most cells are designed for double occupancy. The average length of inmate incarceration is approximately 58 days.

In March 2013, Allegheny County (“County”) issued a Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975). The County received six proposals and ultimately awarded contract #153946 for healthcare and related services in the Allegheny County Jail to Corizon Health, Inc. (“Corizon”), a correctional health care provider based in Tennessee. Per Corizon’s website, Corizon has over 35 years of experience, providing such health care services to 552 facilities in 27 states. Health care services were previously provided to the inmates of the Allegheny County Jail by Allegheny Correctional Health Services (“ACHS”), a nonprofit organization affiliated with the Allegheny County Health Department.

Contract #153946 covers an initial two year term beginning September 1, 2013, but includes three one year extensions which are automatic unless the County terminates the Agreement by providing Corizon with 30 days advance written notice. Based on an average daily inmate population of 2,675, the County agreed to pay Corizon an annual base sum of \$11,500,000 for contract year one. The annual base sum paid to Corizon will be increased (from the contract year one price) year after year consistent with the Medical Care Component of CPI for the Pittsburgh, Pennsylvania area. However, the contract indicates that regardless of the CPI for the applicable contract year, increases in annual compensation shall not exceed 4.25% in any given contract year. The contract also requires Corizon to provide the County with an electronic medical records system, inclusive of implementation and system maintenance. Corizon and the County are each responsible for 50% of the total cost of the electronic medical records system, \$869,700. The County is responsible for paying its share of the fee to Corizon in five equal annual installments of \$86,970. The implementation of the electronic medical records system was to begin prior to September 1, 2014 and was to be fully implemented and functional on or before December 31, 2014.

Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) and Corizon’s corresponding proposal have been incorporated into contract #153946 by reference. Article II Section 2.3.1 of the contract states that in the event of a conflict or inconsistency between the contract documents, or between any contract document and the Agreement (contract #153946), the documents shall prevail and apply in the following order of priority: the Agreement including all Exhibits and Attachments, the County’s RFP for Allegheny County Jail Health Care and Related Services #6975, and Corizon’s proposal.

RFP #6975 identifies a variety of services that the Jail’s inmate healthcare service Provider is required to provide. Required intake services include initial assessment, infectious disease screening, pregnancy testing and care of pregnant females including a program for opiate addicted pregnant women, drugs and/or alcohol detoxification, and emergency services at the intake area. Required clinical services include the provision of history and physical exams, hepatitis testing, immunizations, radiology and laboratory services, dental services, eye exams and glasses, orthopedic devices, needs assessment and screening of personal medical devices, ultrasounds, physical and occupational therapy, medication distribution and chronic care clinic

Introduction

services. As required by RFP #6975, inmate sick call requests are to be reviewed and triaged daily with the Provider being responsible to schedule any follow up care as necessary. Additionally, the Provider is to complete daily medical rounds for inmates in segregation and establish a suicide prevention and suicide watch plan, which is to include inmate screening designed to identify inmates at risk for suicide. RFP #6975 also requires that the Provider provide pharmacy services, mental health services, substance abuse treatment services, infirmary care, emergency services, and other specialized and miscellaneous services. The Jail's inmate healthcare services provider must also arrange for offsite inmate care when necessary, and serve as the provider of last resort for inmates assigned to alternate housing who do not qualify for medical assistance and have no private insurance.

Most healthcare and related services are provided on the 5th floor of the Jail, although licensed practical nurses travel to each individual pod twice daily to dispense medications to the inmates. Under the contract, Corizon is to provide any and all supplies, including medication, needed in the provision of healthcare at the Allegheny County Jail. However, Corizon is not financially responsible for the costs of behavioral health medications. Accordingly, the County bears the cost of the behavioral health medications. During the period September 1, 2013 to February 28, 2014, it appears Corizon submitted \$125,970 in claims for behavioral health medications.

Schedule of Findings and Responses

Finding #1: The Jail's Monitoring and Enforcement of Contract #153946 Has Not Been Sufficient

Criteria: Section 2.2 of contract #153946 indicates that "Corizon's services under this Agreement will be monitored for the County by the Warden of the Allegheny County Jail or his designee."

Condition: The responsibility for monitoring of contract #153946 was delegated to one of the Jail's Deputy Wardens. The Deputy Warden assigned the monitoring responsibility has a multitude of other responsibilities at the Jail, so in practice, monitoring services provided by an external service provider were intended to serve as a key component of the County's monitoring. It appears that the County did not have sufficient measures in place to monitor Corizon's contractual performance at the inception of the contract. We determined that the County did not engage the external service provider to begin monitoring Corizon's performance under contract #153946 until October 29, 2013, and the first limited scope monitoring report issued by the external service provider indicated that its monitoring activities were performed on January 17, 2014, over 4½ months after Corizon began providing inmate healthcare services at the Jail under contract #153946. The procedures performed by the external service provider involved a review of inmate medical records, and the monitoring report identified four "general themes" and offered four "recommendations for consideration." The general themes included lack of progress notes in the medical records, histories and physicals not conducted timely and/or not documented, lack of documentation to substantiate that nurses administered medications, and lack of evidence of receipt and recording of sick call slips within the medical records. During the performance of our procedures, we identified a variety of material noncompliance and a number of serious internal control deficiencies (see findings #2-#13) that may have been prevented or detected and corrected if the County had engaged in adequate monitoring and enforcement of contract #153946.

Cause: It appears that the County did not perceive a need to engage in rigorous monitoring of contract #153946. Given that Corizon was a new provider of healthcare and related services at the Allegheny County Jail, that County-administered healthcare was being replaced by privatized healthcare, that Corizon was known to have a history of significant litigation related to quality of care issues pertaining to its provision of healthcare and related services at correctional institutions at the time of Corizon's selection and contract award, and the size of the contract award (\$11.5 million in the first year with subsequent increases for inflation), the County should have realized a need to engage in vigorous monitoring of contract #153946.

Schedule of Findings and Responses

Effect: A failure to effectively monitor contract #153946 has exposed the County to the unnecessary risks of poor inmate health outcomes, legal liability related to inadequate or improper inmate health care provided by Corizon, and the ineffective use of taxpayer-provided financial resources. In addition, to the extent that the County pays (taxpayers pay) for inmate health care that is either not provided or not provided properly by Corizon, taxpayers will bear the additional cost when indigent former inmates show up at local hospitals and other health care facilities in need of treatment.

Recommendations: We recommend that the Jail should ensure that contract #153946 is adequately monitored. The Allegheny County Health Department (“ACHD”) is not represented in the Allegheny County Jail Oversight Board. ACHD is also not involved in the monitoring of contract #153946. Involving ACHD in oversight and monitoring could help to ensure Corizon’s contract compliance and improve the quality of inmate healthcare at the Jail.

The Jail should also take steps to ensure that Corizon remediates all of the material noncompliance and serious internal control deficiencies that have been identified. The Jail should also begin to develop a contingency plan for the provision of inmate healthcare and related services at the Jail so that the Jail will be able to terminate contract #153946 with Corizon and easily transition to another provider if Corizon fails to remediate all material noncompliance and serious internal control deficiencies in a timely fashion.

Management’s Response: Corizon’s response begins on page 47 of this report. The Warden’s response begins on page 62 of this report.

Controller’s Office Comments: On December 9, 2014, a requisition to create a Healthcare Contract Monitor position in the Jail was received in the Controller’s Office.

Schedule of Findings and Responses

Finding #2: **The Allegheny County Jail is No Longer Accredited by the National Commission on Correctional Health Care, Corizon Has Not Complied with Reporting Requirements, and Corizon Should Be Penalized for Failures to Meet Performance Standards**

Criteria: Section 6.1 of contract #153946 states that “Corizon and the County shall maintain NCCHC [National Commission on Correctional Healthcare] accreditation throughout the term of this Agreement.” NCCHC accreditation is largely dependent upon the Jail inmate healthcare provider’s adherence to nationally recognized healthcare standards.

Section 7.2 of contract #153946 requires that “Corizon shall provide to the County, on a date and in a form mutually acceptable to Corizon and the County quarterly and/or annual reports related to the services rendered under this Agreement. In addition to the aforesaid quarterly and/or annual reports, Corizon will submit the reports set forth in the RFP, Appendix 6.” Appendix 6 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) identifies a variety of reports that the Provider is required to generate for Jail administration:

- Medical Outcome Measures for the American Correctional Association
- Prison Board Monthly Data Reports
- Information on other areas as requested by the Prison Board
- Weekly access to medical department staffing schedules
- Shift reports
- Prison Board annual health care staff racial profile
- Quarterly data on client substance abuse treatment
- Significant incident reports on deaths and suicides
- Suicide attempts and gestures by month
- Mental health referrals by month
- Use of restraints in mental health by month
- Monthly reports on Infectious Diseases
- Quarterly reports on Quality Improvement Initiatives
- Quarterly summary by Chief Medical Officer of overall health of inmates
- Quarterly report on staffing issues and concerns
- Periodic but no less than annual report on equipment needs
- Periodic but no less than quarterly discussions on barriers to healthcare services
- Other data reports as requested by the Jail or other County departments

Schedule of Findings and Responses

The Allegheny County Jail Oversight Board's responsibilities include oversight of the operation and maintenance of the Jail and the health and safekeeping of inmates, among other responsibilities. The RFP requires the Proposer to submit Prison Board Monthly Data Reports so that the Jail Oversight Board has data to evaluate regarding the provision of healthcare and related services at the Jail in order to fulfill these critical oversight responsibilities. The Prison Board Monthly Data Reports are to include data on clinic visits, infirmary patient days, history and physicals, OB clinic, drug & alcohol program, mental health admissions, mental health referrals, commitments to Torrance, emergency visits, surgeries, and outside tests & specialists. It was initially agreed that the Prison Board Monthly Data Reports would be provided by Corizon during the monthly meetings of the Allegheny County Jail Oversight Board.

Section 12.2 of contract #153946 also indicates that "the Physical and Behavioral [Health] Care Performance Standards set forth in Appendix 3 of the RFP shall govern Corizon's performance hereunder with monetary damages and penalties to apply as indicated." However, Section 12.3 of the contract indicates that "no monetary damages or penalties may be assessed for services provided during the first 90 days of this Agreement."

Condition:

The Allegheny County Jail was accredited by the NCCHC in February 2010. At that time, Allegheny Correctional Health Services was the Jail's inmate healthcare provider. The NCCHC accreditation normally lasts for three years, which means that the accreditation would have normally expired at the end of January 2013. We were advised that an extension may have been granted by the NCCHC, but Jail administration was unable to provide any documentation to that effect. We attempted to determine whether the Jail was still accredited by the NCCHC on April 3, 2014, and we were advised by NCCHC staff that the Jail was not accredited. As of our last day of fieldwork, the Jail (with Corizon) had not reapplied for accreditation.

When we inquired of Corizon staff regarding reports that had been submitted, we were advised that the Prison Board Monthly Data Reports were the only valid reports that had been submitted to the Jail Oversight Board and Jail administration. We examined these reports. Corizon did not submit a Prison Board Monthly Data Report that covers the month of September 2013. We attempted to trace the data reported for the metrics in the Prison Board Monthly Data Report that covers the month of December 2013 to supporting documentation, but we were unable to do so. As a result, we do not have adequate assurance that the data that has been reported by Corizon is valid. We also observed that Corizon did not submit any reports that demonstrate its compliance with the established Physical and Behavioral Health Care Performance Standards during the period to which we applied our procedures.

Schedule of Findings and Responses

Cause: We were advised by Jail administration that in early 2014 the NCCHC made a site visit to provide Corizon and the Jail with technical assistance, and identified a number of steps that would need to be taken in order for the Jail (Corizon) to be ready for an NCCHC inspection. We also identified a number of conditions that have or could have an impact on the overall long-term health of inmates that require corrective action. Had the County engaged in timely and effective monitoring of Corizon, the Jail (with Corizon) likely would have been in a better position to seek NCCHC accreditation. However, it appears that the County did not have sufficient measures in place to monitor Corizon's contractual performance at the inception of the contract (see finding #1).

Regarding reporting requirements, Corizon did not submit reports that demonstrate its compliance with the established Physical and Behavioral Health Care Performance Standards because Jail Administration did not require Corizon to submit such reports. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the reporting requirements contained in Section 7.2 of contract #153946.

Effect: The NCCHC accreditation process is intended to ensure that providers of correctional healthcare adhere to nationally recognized healthcare standards. The Jail's inability to attain accreditation suggests that the systems, policies, and procedures in place at the Jail are not designed to ensure adherence to the standards. Failure to adhere to the nationally recognized healthcare standards involves significant risks, including the potential for poor health outcomes, legal liability, wasted resources, staff dissatisfaction, public criticism, judicial oversight, and more. Corizon and the Jail are not in compliance with the accreditation requirement contained in Section 6.1 of contract #153946.

Because Corizon did not prepare and submit reports that demonstrate its compliance with the established Physical and Behavioral Health Care Performance Standards during the period to which we applied our procedures, both Jail administration and Corizon are unable to effectively measure the extent to which Corizon did not comply with the established performance standards. As a result, the County was also unable to determine and did not assess any monetary damages or penalties that should have been assessed to the extent that Corizon did not comply with the established performance standards after the first 90 days of the Agreement. The following are examples of the penalties listed in the Physical and Behavioral Healthcare Performance Standards report contained in Appendix 3 of the RFP:

- Failure to see 90% of newly admitted chronic disease patients within 30 days of admission and 100% within 45 days of admission -- \$1,000 per day

Schedule of Findings and Responses

- Failure to see 100% of urgent referrals within 2 business days of referral -- \$250 per incident
- Failure to complete 100% of specialist visits within 60 days of order -- \$250 per incident
- Failure to administer 90% of essential medications within 2 business days of order and 100% within 3 business days of order -- \$250 per incident
- Failure to meet essential or important standard which results in the loss of accreditation of the Allegheny County Jail – Cost of re-accreditation plus \$20,000; \$10,000 per incident of probation

Corizon did not fully comply with the reporting requirements contained in Section 7.2 of contract #153946 during the period to which we applied our procedures in that Corizon did not submit complete and accurate reports for every month on a timely basis.

Recommendations: We recommend that Corizon management immediately take the necessary steps to resolve the issues identified by the NCCHC and the noncompliance we have identified and then with the Jail reapply for NCCHC accreditation.

Corizon management should also reach agreement with the Jail on the format of reports to be submitted that demonstrate the extent to which Corizon has complied with the established Physical and Behavioral Health Care Performance Standards, and then submit those reports as required.

Finally, Corizon management should take steps to ensure that all required reports are prepared, that the accuracy of the data contained therein is verified, and that the reports are submitted to the County timely on a consistent basis. This should involve clear assignment of the responsibility for report preparation along with supervisory reviews to verify the validity of the report data and the timeliness of report submission.

The Jail should work with Corizon to restore the Jail NCCHC accreditation. The Jail should require Corizon to submit all of the reports specified in the RFP. The Jail should also assess against Corizon the \$20,000 penalty provided in the RFP for loss of the Jail's NCCHC accreditation, and assess any other applicable penalties to the extent that Corizon fails to achieve the established performance standards.

Management's Response:

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Schedule of Findings and Responses

Controller's Office

Comments:

Corizon states on page 51, paragraph 4 that they have “always reported medical and behavioral health statistical data to the County on a monthly basis since the inception of the Contract.” However, Corizon could not provide these reports to the Controller's Office. Further, the data in the reports that were provided could not be validated.

Schedule of Findings and Responses

Finding #3: Corizon Has Not Maintained the Required Staffing Levels

Criteria: Section 4.1 of contract #153946 stipulates that “Corizon shall provide medical, technical, and support personnel as necessary for the rendering of health care services to inmates at the Facility. The staffing matrix attached hereto as Exhibit C, and incorporated herein by reference, includes the agreed-upon staffing compliment necessary to provide the health care services required by the Facility”. Corizon’s compensation under contract #153946 is based on the expectation that Corizon would maintain at least the minimum required staffing levels throughout the contract period.

Condition: Corizon has not maintained the minimum staffing levels identified in Exhibit C to contract #153946 during the period to which we applied our procedures. We selected 3 bi-weekly payroll periods during the period to which we applied our procedures, and then selected 3 days from each of those periods (a total of 9 days). For those 9 days, we compared the actual hours worked by Corizon’s staff and its contracted employees to the hours that should have been applied based on Exhibit C to the contract for each of the three daily shifts (a total of 27 shifts):

- 6 of the 27 shifts (22%) were staffed at a level higher than the minimum staffing required per Exhibit C. The shift with the most staffing above the minimum level was staffed 36.5 hours above the minimum (this equates to less than five employees based on 8 hour shifts).
- 21 of the 27 shifts (78%) were staffed at a level that was below the minimum required staffing. The shift with the greatest deficiency below the minimum required level was staffed 120.75 hours below the minimum (this equates to approximately 15 of the required minimum of 47 employees based on 8 hour shifts).

Overall, while 6 of the 27 shifts were staffed at a level higher than the minimum staffing, the staffing for every day that we tested (9 of 9, 100%) was below the minimum required staffing per Exhibit C of the contract. The average understaffing across the 9 days averaged 50.5 hours per day (more than 6 employees short per day based on 8 hour shifts). We observed that the staffing deficiencies occurred across a broad range of positions, including management-level positions, medical and mental health professionals, and other staff positions.

Cause: Allegheny County’s contract #153946 with Corizon is a fixed price contract. Given that Corizon has an incentive to lower its costs to increase the profit it realizes under the contract, the Allegheny County Jail should have been monitoring Corizon’s contractual performance to ensure that the Jail was receiving the services for which it was paying. Since the minimum staffing levels identified in Exhibit C to the contract were

Schedule of Findings and Responses

deemed necessary to provide the health care services required by the Facility, monitoring the personnel resources being applied by Corizon should have been a key component of the County's contract monitoring. We noted that the County's contract monitoring was deficient during the period to which we applied our procedures (see Finding #1). Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the personnel requirements contained in Section 4.1 of and Exhibit C to contract #153946.

Effect: The majority of the noncompliance we noted during the performance of our procedures (see Findings #2 and #4-#13) was most likely attributable at least in part to Corizon's failure to apply adequate personnel resources to the provision of inmate healthcare services at the Allegheny County Jail. Some of the noncompliance, such as Corizon's failure to maintain complete and accurate medical records (see Finding #4), Corizon's failure to obtain needed medical information during the intake process (see Finding #5), Corizon's failure to provide required clinical care (see Finding #6), and Corizon's failure to administer prescribed medications in a timely fashion (see Finding #7) have also had an adverse impact on the overall health of inmates. Corizon has not complied with the personnel requirements contained in Section 4.1 of and Exhibit C to contract #153946 in that the required minimum staffing levels have not been maintained.

Recommendations: We recommend that Corizon management take steps to ensure that the minimum staffing levels specified in Exhibit C to the contract are consistently maintained. This should involve an analysis of Corizon's scheduling process which appears to result in certain positions on each shift being consistently understaffed or overstaffed. Corizon management should also be evaluating compliance with contractual obligations, and consider staffing in excess of the minimum required staffing levels for certain positions to the extent that Corizon continues to fail to comply with its contractual obligations in those areas.

We recommend that the Jail monitor Corizon's staffing daily until Corizon demonstrates that it is maintaining the required staffing levels, and then monitor Corizon's staffing periodically as a component of the Jail's overall contract monitoring.

Management's Response: Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Schedule of Findings and Responses

Controller's Office

Comments:

Corizon states on page 51, paragraph 6 that the "methodology is flawed as it does not reflect all hours worked for the shifts selected...appear not to include the hours worked by agency nurses...". The Controller's testing included all hours worked for any employee or contract employee paid.

Schedule of Findings and Responses

Finding #4: Corizon Has Not Maintained Complete and Accurate Inmate Medical Records and Has Not Begun Implementing Electronic Medical Records as Required

Criteria: Section 7.1 of contract #153946 stipulates that “Corizon shall cause and require to be maintained complete and accurate medical records for each inmate housed in the Facility who has received health care services during the term of this Agreement.” Exhibit C to contract #153946 specifies required minimum staffing levels by position, including minimum staffing levels for the Medical Records Clerk position.

Section 24.1 of contract #153946 requires that “Corizon shall provide the County with CorrecTek’s Electronic Medical Record Solution (“EMR”) inclusive of implementation and system maintenance.” Section 24.4 of the contract requires that “implementation of the EMR shall begin at a mutually agreeable time before September 1, 2014 and the EMR shall be fully implemented and functional on or before December 31, 2014.”

Condition: During our testing of Corizon’s compliance with other requirements, we identified deficiencies in Corizon’s maintenance of medical records:

Intake

- Corizon was unable to produce 1 of 60 inmate medical records (2%) we requested for testing.
- We noted that 3 of the 59 inmate medical records produced (5%) did not contain the 3-page questionnaire it utilizes to document intake health assessments.
- We noted that 8 of the 59 inmate medical records produced (14%) contained 3-page intake questionnaires that were not complete.

Clinical Care

- We noted that for 12 of 60 inmate medical records (20%), medications had been ordered for the inmates, but the medical records did not contain practitioner’s orders or progress notes for the medications.

Pharmacy

- We determined that Corizon dispensed medications to 7 of 25 inmates selected for testing (28%) without supporting practitioner’s orders or progress notes for the medications contained in inmates’ medical records.

We also identified a number of other instances in which documentation to indicate that required services were performed was not included in inmates’ medical records. Specifically, these deficiencies relate to physical exams (see Finding #5), other clinical services (see Finding #6),

Schedule of Findings and Responses

sick call slips (see Finding #10), and re-entry services (see Finding #13). We also observed that the medical records provided to us for 6 of 60 inmates (10%) selected for testing of compliance with clinical care requirements and 11 of 60 inmates (18%) selected for testing of compliance with re-entry services requirements consisted of papers that were not maintained in manila file folders like the medical records for other inmates, and were not complete medical records. These papers were either stapled together, paper clipped, or held together using rubber bands. It is possible that these papers should have been included in existing manila file folders with the remainder of the medical records for the inmates we selected which Corizon may have been unable to locate/produce.

We were advised by Corizon management on October 7, 2014 that Corizon had not begun to implement the CorrecTek electronic medical records solution, and that the timing of the implementation was yet to be determined.

Cause:

We noted that Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) indicates that the Medical Records Coordinator position is a desired position, such that a Provider would not be required to staff that position. Corizon did not utilize a Medical Records Coordinator during the period to which we applied our procedures. Doing so may have improved Corizon's ability to comply with the applicable medical records requirements.

We also noted that the terms of contract #153946, agreed to by Corizon and the County, require Corizon to staff the Medical Records Clerk position with a minimum of 6.2 full-time equivalents (FTEs), whereas the previous health care services provider staffed the position with 9.2 FTEs. While the reduction in FTEs in this area results in lower operating costs for Corizon, it is possible that the severity of the reduction in personnel resources applied to this area, approximately 33%, adversely impacted Corizon's ability to comply with the applicable medical records requirements. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the medical records requirements contained in Section 7.1 of contract #153946.

It appears that the implementation of the CorrecTek electronic medical records solution may have been delayed due to other operational issues that require resolution.

Effect:

A failure to maintain complete and accurate inmate medical records could result in practitioners at the Jail not having all of the relevant information necessary to make informed medical decisions available to them. This in turn could result in the provision of improper medical care, which could

Schedule of Findings and Responses

have a substantial adverse impact on the overall long-term health of the inmates. Corizon has not complied with the medical records requirements contained in Section 7.1 of contract #153946.

Paper filing systems have inherent limitations. There are a number of different types of care providers within the Jail (medical, mental health, dental, etc.) that need the medical records files of inmates. With the Jail's paper filing system, there is normally only one paper medical records file for each inmate. The paper files can be difficult to locate, and difficulty in locating the medical records does not facilitate the provision of timely and proper care, especially in emergency situations. The handwriting in paper files can also be difficult to decipher. With electronic medical records, the data is easy to locate, easier to interpret, and multiple users should be able to access inmate medical records at the same time. The utilization of electronic medical records should result in lower costs, better medical records, greater efficiency, the elimination of duplication of procedures, and overall improvement in the quality of inmate medical care provided at the Jail. Consequently, the Jail and Corizon are missing an opportunity to lower inmate healthcare costs, improve inmate medical records, and improve the efficiency and quality of healthcare provided at the Jail to the extent that the implementation of an electronic medical records solution is delayed or not implemented. Corizon has not complied with the electronic medical records implementation requirements contained in Sections 24.1 and 24.4 of contract #153946.

Recommendations: We recommend that Corizon management take steps to ensure that complete and accurate medical records are maintained for each inmate. This should involve regular supervisory reviews of medical records to ensure that all required documentation is being included in the files in a timely fashion. Corizon management should also immediately fully staff the Medical Records Clerk positions, should consider utilizing a Medical Records Coordinator, and should consider applying additional personnel resources to the medical records process to the extent that Corizon continues to experience difficulty in maintaining complete and accurate inmate medical records. Corizon management should also take steps to implement the CorrecTek electronic medical records solution as soon as is reasonably possible.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD review inmate medical files as a component of its monitoring to help ensure that inmate medical records are complete and accurate. The Jail should also mandate the implementation of the CorrecTek electronic medical records solution.

**Management's
Response:**

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Schedule of Findings and Responses

Controller's Office

Comments:

Corizon claims on page 53, paragraph 5 of its response that it has "re-organized the medical record room, reconfigured medical filing shelves," and taken other similar such measures in the absence of creating an electronic medical records system. This does not negate the requirement to create an electronic medical records system.

Schedule of Findings and Responses

Finding #5: Corizon Could Not Produce Documentation to Evidence That Intake Health Assessments Were Conducted for Newly-Admitted Jail Inmates as Required

Criteria: Section 2.3 paragraph 1 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) requires the provider to conduct initial screening at the door of the booking area for all new arriving inmates to identify physical, mental health, and substance abuse issues and determine suitability to safely continue through the booking and preliminary arraignment processes. It requires that an intake assessment be performed; along with tuberculosis, sexually transmitted disease, and human immunodeficiency virus testing; pregnancy testing for females; a program for opiate addicted pregnant women; detoxification from drugs and alcohol; and initial intake area emergency services. Section 2.3 paragraph 6 of the RFP states that the Provider is required to conduct mental health screening and mental health RN assessment upon intake as appropriate.

Section 2.3 paragraph 11 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) also requires that the Provider screen all inmates for Post-Traumatic Stress Disorder (PTSD) who self-report veteran status during the intake process and remain in the Jail for at least 48-72 hours.

Condition: We selected a sample of 60 medical files for inmates that were admitted to the Jail during the period to which we applied our procedures for testing to determine whether Corizon complied with the applicable intake requirements.

- Corizon was unable to produce 1 of the 60 inmate medical files (2%) we selected for testing (see Finding #4).
- We determined that 3 of the 59 inmate medical files produced (5%) did not contain the three page questionnaire that is used to document intake assessment.
- We also determined that 8 of the 59 inmate medical files produced (14%) contained three page questionnaires that were not complete. We observed that 1 of these 8 files contained documentation that evidenced that the inmate was subsequently treated for a chronic care condition that was not documented on the three page questionnaire.

We observed that the intake documentation contained in the medical files for 23 of the 59 inmates for whom medical files were produced indicated that the inmate reported taking prescribed medication(s).

Schedule of Findings and Responses

- We determined that 3 of these 23 inmate medical files (13%) did not contain documentation to support that the intake nurse verified the inmates' prescription(s) listed on the intake forms.

We observed that 25 of the 59 inmate medical files produced contained intake forms that included referrals for additional care.

- We determined that 8 of these 25 inmate medical files (32%) did not contain documentation to evidence that the additional care was provided.

We identified 4 inmates who reported that they were veterans during the intake process and remained in the Jail longer than 48 hours.

- We determined that 1 of the 4 inmates (25%) that claimed veteran status was not screened for PTSD by Corizon.
- We were also verbally advised by Corizon staff that 1 of the 4 inmates (25%) that claimed veteran status refused the PTSD screening, but the inmate medical record contained no such documentation.

Cause:

This condition appears to be attributable in part to Corizon failing to apply adequate personnel resources to the provision of inmate healthcare (see Finding #3). Corizon also did not design and effectively implement internal control procedures that would have facilitated its compliance with the intake requirements contained in Section 2.3 paragraphs 1, 6, and 11 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect:

Intake assessments are intended to identify the medical and mental health problems of newly-admitted inmates in order to determine their potential healthcare needs. Prescription medications that inmates are taking at the time of intake should be identified and verified to facilitate continuity of care. Documentation of intake assessments are required to be included in inmate medical files. Consequently, failures to conduct and document intake assessments result in inmate medical records being incomplete, can result in failures to provide inmates with needed medical care, mental health care, and medications, and can pose threats to the health and welfare of other inmates and Jail staff. This condition could also expose Corizon and the County to an unnecessary risk of loss to the extent that inmates commit suicide, engage in other self-injurious behavior, or fail to receive necessary care because the need for medical or mental health care was not identified during the intake process. Corizon has not complied with the intake requirements contained in Section 2.3 paragraphs 1, 6, and 11 of Request for Proposal for Allegheny County Jail Health Care and

Schedule of Findings and Responses

Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: We recommend that Corizon management take steps to ensure that comprehensive intake assessments are routinely performed and consistently documented in inmate medical files, that inmate prescriptions are consistently verified, that PTSD screenings are routinely conducted for inmates that self-report veteran status and remain in the Jail for at least 48 hours, and that additional care determined to be necessary during the intake process is actually provided and provided in a timely fashion. This should involve periodic supervisory reviews of inmate medical records to verify that these objectives are being accomplished.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD review the three page questionnaires that should be included in inmate medical files as a component of its monitoring to help ensure that intake assessments are being completed properly, and review the medical files to help ensure that appropriate additional care is being provided when referrals for follow-up care are made.

**Management's
Response:**

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

**Controller's Office
Comments:**

Corizon's comments are general in nature in response to specific findings.

Schedule of Findings and Responses

Finding #6: Corizon Has Not Provided Inmates with Required Clinical Care

Criteria: Section 2.3 paragraph 2 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) requires that the Provider provide clinical care services, which include history and physical exams, hepatitis testing, immunizations, radiology services, laboratory services, dental services, dental hygiene services, eye exams and glasses, orthopedic devices, ultrasounds, physical and occupational therapy, medication distribution, chronic care services, and other services. Physical exams are to be routinely completed within 14 days of admission to the Jail. Medications are to be provided twice a day for inmates in general population and more frequently for inmates in the infirmary or acute mental health units. Distribution is to be done in accordance with practitioner's orders regarding time of day, dosage, with/without food, and frequency.

Condition: We intended to test a sample of 60 medical files of inmates who were incarcerated during the period to which we applied our procedures to determine whether Corizon completed the inmates' physical exams within 14 days of their admission to the Jail as required.

- Corizon was unable to produce 1 (2%) of the inmate medical files.

When we examined the 59 medical files that were produced, we determined that 29 of the inmates we selected were incarcerated for less than 14 days. With respect to the 30 inmates who were incarcerated for 14 days or longer:

- We determined that the medical files for 7 of the inmates (23%) contained no indication that a physical exam had been performed.
- We determined that the medical files for 18 of the inmates (60%) indicated that a physical exam was performed, but not within 14 days of the inmate's admission to the Jail as required. The physicals exams ranged from 1 to 55 days late.

We also reviewed the medical files for a sample of 60 inmates who were incarcerated during the period to which we applied our procedures for whom medications or other clinical services had been prescribed and attempted to determine whether Corizon distributed the medications and provided other prescribed clinical services as required.

- For 15 of the 60 inmates (25%), medications prescribed by the practitioner (listed on the practitioner's order form or progress notes) could not be traced to a medication order for the inmate.

Schedule of Findings and Responses

- For 12 of the 60 inmates (20%), medication was ordered for the inmate, but the medical file did not contain a practitioner's order or progress notes for the medication.
- For 4 of the 60 inmates (7%), we found no evidence in the inmate's medical file to indicate that other prescribed clinical services were provided. The other clinical services included a tuberculosis screening, X-rays (3), a PAP smear, and provision of a cane for walking.

Cause: It appears that Corizon did not apply adequate personnel resources to the provision of clinical care and the maintenance of inmate medical records (See Findings #3 & #4). Corizon also did not design and effectively implement internal control procedures that would have facilitated its compliance with the clinical care requirements contained in Section 2.3 paragraph 2 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: Failure to provide adequate healthcare to an incarcerated person is an issue of concern to Allegheny County and the Jail. In addition to the potential for a substantial adverse impact on the overall long-term health of inmates, such failures to provide adequate healthcare to inmates could also be detrimental to public health and safety, and result in financial or legal penalties. Corizon has not complied with the clinical care requirements contained in Section 2.3 paragraph 2 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: We recommend that Corizon management take steps to ensure that required clinical services are routinely provided and consistently documented in the inmates' medical files. This should involve routine supervisory reviews and periodic management reviews of inmate medical records files to verify that the required clinical services are being provided and documented.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD review the medical files to help ensure that required clinical care is being provided to the inmates.

Management's Response:

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Schedule of Findings and Responses

Controller's Office

Comments:

Corizon states on page 54, paragraph 5 that "The Report does not cite any cases of concern or provide objective data to support the allegations regarding clinical care." The Controller's testing included specific case files in its sample.

Schedule of Findings and Responses

Finding #7: Corizon Did Not Comply With Pharmacy Management Requirements

Criteria: Section 2.3 paragraph 4 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) indicates that the Provider must develop, implement, and monitor a procedure for pharmacy management. The RFP stipulates that among other things, the Provider's policies and procedures are to address the ordering of pharmaceuticals to ensure adequate and appropriate supplies and minimal use of emergency ordering and inventory control. Per Corizon's policies and procedures, "the medication nurses are responsible to track stock medication refills for their assigned areas daily", and "the medication nurses will obtain orders for renewal from the appropriate provider when identified and send the order to the pharmacy." We were advised by Corizon staff that physical inventories of stock medications are to be performed weekly as provided for in the PharmaCorr Operations Manual.

Section 2.3 paragraph 4 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) also indicates that "prescription medications must be made available in a timely way to all patients, whether that is by stock medications, local pharmacy acquisitions or remote pharmacy delivery."

Condition: We selected a sample of three individual weeks during the period to which we applied our procedures to assess Corizon's compliance with the pharmacy management requirements contained in the RFP. For those three weeks, we requested all medication reorder sheets submitted to the pharmacy during the week and the weekly medication inventories. Corizon provided us with 13 medication reorder forms for the three weeks we selected for testing. In examining the reorder forms, we observed that 8 of the 13 reorder forms (62%) listed the quantity on hand for at least one medication that was being ordered from the pharmacy as zero. This suggests that such medications were not being reordered timely as required to prevent the need for emergency orders. We also observed that 7 of the 13 reorder forms (54%) did not identify the current quantity on hand for at least one medication that was being ordered from the pharmacy. It is possible that Corizon was also completely out of these medications. However, we were unable to determine this as Corizon was unable to provide weekly medication inventories. We were advised by Corizon staff that medication inventories were not performed weekly until June 20, 2014 (well after the period to which we applied our procedures). We were instead provided with a medication inventory for the fourth quarter of 2013.

We attempted to assess Corizon's compliance with the requirements to make prescription medications available to inmates timely by selecting three different weeks and analyzing PharmaCorr's *Refill Promptness*

Schedule of Findings and Responses

Reports for those weeks. We observed that of the 298 prescription renewals included therein:

- 161 (54%) appeared to be refilled late, ranging from 1 to 58 days late
- 66 (22%) appeared to be refilled early, and
- for 65 (22%) of the prescriptions, there was not sufficient data available on the reports to determine the timeliness of the refills.

However, we were subsequently advised by Corizon staff that Corizon's nurses were not following Corizon's prescribed process for ordering inmate medications from the pharmacy, and that as a result, the report data was invalid. Corizon was ultimately unable to provide us with documentation to evidence that prescription refills were timely during the three weeks we selected for testing.

Cause: Supervisory reviews of medication reorders and the promptness of prescription refills were not performed. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the pharmacy requirements contained in Section 2.3 paragraph 4 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: Some prescription medications can have adverse health consequences if they are abruptly discontinued or not taken timely. Certain types of prescription medications, such as antidepressants, antibiotics, and steroids require strict regimens in order to remain effective and/or prevent harmful side effects. Not having needed medications available on-site, and not making needed medications available to inmates timely could all have an adverse impact on the overall long-term health of inmates. Corizon has not complied with the pharmacy requirements contained in Section 2.3 paragraph 4 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: Corizon management should review the reordering of medications by its staff to ensure that reordering is complete and accurate, and occurs timely. Corizon management should also take steps to ensure that nursing staff understand and follow the prescribed procedures for processing prescription refills, and ensure that valid records regarding the timeliness of prescription refills are maintained and periodically monitored.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD review the medical files to help ensure that inmates are being provided with prescribed

Schedule of Findings and Responses

medications in a timely fashion, and apply procedures to help ensure that Corizon is maintaining appropriate levels of stock medications at the Jail.

Management's

Response:

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office

Comments:

Inquiries revealed that the Pharmacy Consultant was only at the Jail once per quarter. In addition, the Talyst machine is still not operational.

Schedule of Findings and Responses

Finding #8: Corizon Has Not Ensured the Readiness of Emergency Equipment and Supplies

Criteria: Section 2.3 paragraph 9 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) requires that emergency supplies and equipment including, but not limited to, oxygen, ventilation bags, automatic defibrillators, and emergency drugs must be available, inspected, and routinely inventoried.

Condition: Corizon maintains an emergency cart and automatic external defibrillator (AED) in the Allegheny County Jail's infirmary, and an emergency bag and an AED in the intake area. During the period to which we applied our procedures, Corizon did not maintain records to document inspection of the emergency cart and AED in the infirmary. Corizon did not begin to maintain records to document inspection of the emergency bag in the intake area until December 2013, and did not begin to maintain records to document inspection of the AED in the intake area until October 2013. However, Corizon was unable to produce documentation to evidence inspection of the AED in the intake area for the month of February 2014. During the limited periods for which inspection documentation was actually maintained for the emergency equipment in the intake area, the documentation reflects that inspections generally did not occur on a routine basis as should be expected. We observed that the inspection logs indicate that the emergency bag was not inspected for up to 10 days, and the AED was not inspected for up to 21 days.

Cause: Regarding the timeliness of inspections, we were advised that some Corizon staff did not fully understand what was expected of them. Some Corizon staff thought that inspections of the emergency equipment only needed to be performed once the equipment had been used or the initial seals on the equipment had been broken. Corizon did not determine that its staff did not understand what was expected of them and that the inspections were not being performed or documented in a timely fashion until we inquired about the inspections. There was no periodic supervisory review of the inspection logs. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the emergency services requirements contained in Section 2.3 paragraph 9 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: There is not adequate assurance that emergency equipment and supplies will be available and function as intended when needed in emergency situations. If emergency equipment is not operating correctly or emergency supplies are not adequately stocked, the lives of inmates and staff could be at risk. Even if the loss of life does not occur, a failure to be prepared to respond in emergency situations could have a substantial

Schedule of Findings and Responses

adverse impact on the overall long-term health of inmates. Corizon has not complied with the emergency services requirements contained in Section 2.3 paragraph 9 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: We recommend that Corizon management take steps to ensure that emergency equipment and supplies are routinely inspected and the inspections documented. This should involve reviewing the inspection policies and prescribed procedures with the Corizon staff assigned responsibility for conducting the inspections, ensuring that inspection logs are consistently maintained, and requiring that supervisors periodically review the inspection logs to ensure that the required inspections are occurring and are properly documented.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD periodically review the inspection logs to help ensure that routine inspections of emergency equipment and supplies are being performed as required.

Management's Response:

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office Comments:

Corizon states on page 57, paragraph 1 that "the Report fails to mention any adverse outcome related to the readiness or availability of emergency equipment and supplies." The fact that an adverse outcome was not observed does not negate the importance of this finding.

Schedule of Findings and Responses

Finding #9: Corizon Could Not Produce Documentation to Evidence Pre-Placement Health Assessments and Medical and Mental Health Rounds Were Performed for Inmates in Segregation

Criteria: Section 2.3 paragraph 5b of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) requires that “Provider staff must assess and document each inmate’s medical and behavioral health prior to placement in segregation.” It further states that “rounds are [to be] completed daily by RN [registered nurses] on all persons in segregation related to medical issues and at least 3 times a week by RN mental health staff or more frequently, as needed.” Rounds are visits that enable nursing staff to ascertain the general medical and mental health status of inmates. These requirements are intended to ensure that inmates placed in segregation maintain their medical and mental health while physically and socially isolated from the rest of the inmate population.

Condition: During the period to which we applied our procedures, Corizon did not routinely maintain documentary evidence to demonstrate that its staff completed the required health assessments prior to the inmates’ placement in segregation and performed the required medical and mental health rounds once the inmates were placed in segregation. Consequently, we do not have adequate assurance that the required pre-placement health assessments were routinely conducted and that the required segregation rounds were routinely performed during the period to which we applied our procedures. We selected a sample of 6 inmates that were in segregation during the period and reviewed their medical files to determine whether the required pre-placement health assessments and segregation rounds had been documented in the files.

- For 5 of the 6 inmates (83%), the medical files did not contain pre-placement medical or mental health assessments.
- For all 6 of the inmates (100%), the medical files did not contain documentation to evidence that all of the daily medical rounds were performed. In fact, 1 of these 6 files (17%) did not contain documentation to evidence that any medical rounds had been performed.
- For all 6 of the inmates (100%), the medical files did not contain documentation to evidence that the required mental health rounds were made at least 3 times per week.

Cause: Supervisory review procedures to ensure that pre-placement health assessments and medical rounds and mental health rounds were conducted and documented for inmates in segregation were not performed. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the segregation round requirements contained in Section 2.3 paragraph 5b of Request for

Schedule of Findings and Responses

Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: A failure to perform the required pre-placement health assessments could result in any existing medical conditions and mental illnesses of inmates being exacerbated by their placement in segregation. A failure to perform the required segregation rounds could result in a failure to identify serious inmate medical and mental health conditions that require treatment. These conditions could have a significant adverse impact on the overall long-term health of inmates. Corizon has not complied with the segregation rounds requirements contained in Section 2.3 paragraph 5b of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: We recommend that Corizon management take steps to ensure that the required pre-placement health assessments and segregation rounds are routinely performed and consistently documented in the inmates' medical files. This should involve periodic supervisory observation of the medical and mental health rounds, and periodic supervisory reviews of medical records of inmates in segregation to ensure that the pre-placement health assessments and rounds have been documented.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD periodically review the medical records of inmates in segregation to help ensure that the required pre-placement health assessments and all of the required medical and mental health rounds are being performed.

Management's Response: Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office Comments: We are pleased that Corizon is implementing our recommendations.

Schedule of Findings and Responses

Finding #10: Corizon Could Not Produce Documentary Evidence to Demonstrate that an Appropriate Triage Process Was Used to Prioritize Inmate Sick Call Requests

Criteria: Section 2.3 paragraph 5a of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) requires registered nurses (RNs) to assess inmates' medical and mental health complaints. It states that "all sick call requests are (to be) picked up from inmate housing units daily by the Provider and must be reviewed and triaged in a timely manner to ensure an adequate response time to all levels of offender health care needs." It further states that "after a sick call visit, the nurse consults with the on-call practitioner for orders and assures orders are entered into the medical record as appropriate."

Condition: During the period to which we applied our procedures, Corizon did not maintain documentary evidence to demonstrate that a triage process had been utilized to prioritize inmate sick call requests. Consequently, we do not have an adequate level of assurance that an appropriate triage process had in fact been utilized during the period. In addition, because such documentation was not maintained and because we do not have adequate assurance that all inmate sick call slips have been included in the inmates' medical files (see finding #4), Corizon cannot effectively demonstrate and we do not have adequate assurance that all or a vast majority of inmate sick call requests were properly evaluated and addressed (we are aware that medical treatment may not always be deemed necessary) during the period. In an attempt to specifically determine whether documentation of sick call requests and the related treatment or other disposition were actually documented in inmate medical files during the period, we selected a sample of 10 inmates that made sick call requests from a particular patient encounter log and reviewed the sick call documentation, if any, in their medical files.

- Sick call slips were not included in 2 of the 10 medical files (20%).
- The sick call slips contained in 3 of the 10 medical files (30%) did not indicate the date that the sick call slip was initially reviewed by a registered nurse.
- There was no documentation in the medical files of 2 of the 10 inmates (20%), such as notes on the sick call slips, progress notes, or practitioner's orders, to support that treatment had actually been provided (or not provided as deemed unnecessary) in connection with the sick call requests.

Cause: Corizon did not require its nursing staff to maintain a sick call (triage) log during the period to which we applied our procedures. Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the sick call requirements contained in Section 2.3 paragraph 5a of Request for Proposal for Allegheny County

Schedule of Findings and Responses

Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: The lack of documentation of a triage process impairs Corizon's and the Jail's ability to determine whether all levels of inmate health care needs have been addressed, and addressed in a timely fashion. A failure to properly triage and address sick call requests in a timely fashion could result in a failure to treat serious medical and mental health conditions in a timely fashion. Untreated medical and mental health conditions could have a substantial adverse impact on the overall long-term health of inmates. The health of Jail staff and other inmates could also be impacted to the extent that untreated conditions are communicable. Corizon has not complied with the sick call requirements contained in Section 2.3 paragraph 5a of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Recommendations: We were advised that as a result of our audit inquiries, Corizon has developed a sick call log which will be utilized going forward. The log should include, at a minimum, the date each sick call request was submitted, the condition identified, the date it was triaged, the assessment of severity and/or the planned order of treatment, and the date that treatment was provided (or not provided as deemed unnecessary). Routine supervisory reviews and periodic management reviews of the sick call log should be performed to verify that an appropriate triage process is actually occurring and is adequately documented, and there is an adequate response time to all levels of inmate health care needs. We also recommend that Corizon take steps to resolve its noncompliance with medical records requirements (see Finding #4) to help ensure that all sick call requests and the related treatment (or other dispositions) are consistently documented in the inmates' medical files.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD periodically review the sick call log and any other documentation as necessary to help ensure that an appropriate triage process is in place to ensure an adequate response time to all levels of inmate healthcare needs, and review the inmate medical records to help ensure that all sick call requests and related treatment are documented in the records.

Management's Response: Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Schedule of Findings and Responses

Controller's Office

Comments: Corizon describes a process on page 58 of their response for sick call triage that was explained to the Controller's Office during the course of the engagement, however, no evidence of this process could be substantiated.

Schedule of Findings and Responses

Finding #11: Corizon Has Not Responded to Inmate Medical Grievances Timely

Criteria: Section 7.8 of contract #153946 requires that “Corizon will maintain a grievance mechanism for health complaints (“Grievance Policy”), for the purpose of addressing inmate grievances regarding medical services provided within the Facility. Corizon shall be responsible for administering the Grievance Policy and maintaining records of the grievances processed in accordance therewith. This Grievance Policy is subject to the review and approval of the County.” Although not explicitly stated in the contract, inmate medical grievances could potentially identify improper or inadequate medical care provided by Corizon, which could have an adverse impact on the overall long-term health of inmates. As a result, inmate medical grievances should be addressed as soon as is reasonably possible so that any action necessary to remediate deficiencies in care (if possible) can be taken swiftly.

Condition: Corizon’s tracking of inmate medical grievances and response times were insufficient during the period to which we applied our procedures. The Grievance Policy developed by Corizon, which permits Corizon to take up to 14 days to respond to inmate grievances from the date that Corizon receives them, is not reasonable given the circumstances surrounding grievance handling at the Allegheny County Jail. Jail personnel are charged with collecting and processing the majority of inmate grievances in accordance with the established Jail policy (now Jail Policy #91). When grievances related to medical services provided by Corizon are received by the Jail, they are routed to Corizon for resolution. While we were advised by Jail administration that routing medical grievances to Corizon normally takes only two to three days, Corizon staff have asserted that the Jail’s routing of medical grievances to Corizon often takes much longer. Corizon staff advised us that Corizon began date-stamping grievances received during the period to which we applied our procedures as a result of this condition (although Corizon also would have needed some means to determine when it received inmate medical grievances in order to determine whether it complied with its own Grievance Policy). We selected a sample of 50 inmate medical grievances during the period to which we applied our procedures for testing purposes. During our review of the grievances, we did note Corizon date stamps on grievances that were collected from the inmates by the Jail at least a month before the stamped date.

- We determined that 22 of the 50 inmate medical grievances (44%) were not recorded in the grievance logs maintained by Corizon during the period.
- We could not determine whether 31 of the 50 inmate medical grievances (62%) were responded to within 14 days as required by Corizon’s Grievance Policy.

Schedule of Findings and Responses

- For 18 of these 31 grievances we were unable to determine Corizon's receipt date (as there was no date stamp).
- For 3 of these 31 grievances we were unable to determine Corizon's response date.
- For 10 of these grievances we were unable to determine both Corizon's receipt date and Corizon's response date.
- Of the 19 inmate medical grievances for which we were able to determine both Corizon's receipt date and response date, 11 (58%) were not responded to within 14 days as required by Corizon's Grievance Policy. Corizon's responses ranged from 2 to 17 days late.

Cause: The failures to properly track and respond to inmate medical grievances within 14 days of Corizon's receipt were attributable to Corizon not designing and effectively implementing internal control procedures that would have facilitated its compliance with the requirements applicable to inmate medical grievances contained in Section 7.8 of contract #153946. The utilization of a Grievance Policy that permits Corizon to take up to 14 days to respond to inmate grievances from the date that Corizon receives them appears to be attributable to a lack of sound judgment. Given that the Jail has not consistently been timely in routing inmate medical grievances to Corizon and Corizon was aware of this, and that inmate medical grievances could potentially identify improper or inadequate medical care provided by Corizon, which could have an adverse impact on the overall long-term health of inmates, 14 days is not a reasonable time frame in which to address inmate medical grievances.

Effect: A failure to address inmate medical grievances timely could result in a failure to identify in a timely fashion improper or inadequate medical care that may have been provided. This could have a substantial adverse impact on the overall long-term health of inmates. Corizon has not complied with the requirements applicable to inmate medical grievances contained in Section 7.8 of contract #153946.

Recommendations: We recommend that Corizon management revise Corizon's Grievance Policy to provide for a more reasonable (shorter) timeframe for responding to inmate medical grievances, and take steps to ensure that inmate medical grievances are properly tracked and that the grievances are responded to within the timeframe specified in Corizon's Grievance Policy. This should involve routine supervisory reviews of grievance tracking and handling as well as periodic management evaluation for sufficiency and effectiveness.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD periodically review inmate medical grievances and Corizon's responses to help ensure that the grievances are being adequately addressed in a timely fashion.

Schedule of Findings and Responses

Management's

Response:

Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office

Comments:

We are pleased that Corizon is implementing our recommendations.

Schedule of Findings and Responses

Finding #12: Corizon Has Delayed the Assignment of Inmates to Alternative Housing

Criteria:	Section 2.3 paragraph 16b of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) indicates that the Allegheny County Jail requests 800-1,000 physical and mental health stability clearances per year on inmates being considered for transfer to alternative housing placements. The Provider is expected to provide those clearances in a timely fashion (within 5 business days) to assist Jail administration in effectively managing the Jail's inmate population. Jail Policy 37-A, <i>Alternative Housing Referral and Clearance Policy for Family Division Commitments</i> , which was developed and became effective August 29, 2013, formalized the 5 business day turnaround requirement.
Condition:	We determined that for 13 of 30 inmates (43%) we selected for testing of Corizon's compliance with the alternative housing services requirements, medical clearances requests were not responded to by Corizon within 5 business days. Corizon's responses ranged from 1 to 7 days late. We also observed that 1 of the 30 responses (3%) did not contain a practitioner's signature.
Cause:	Supervisory review procedures to ensure that medical clearance requests are addressed timely were not performed. We were advised by Corizon staff that these requests were addressed as soon as possible, but the frequent lack of timeliness suggests that adequate personnel resources were not consistently applied to this process during the period to which we applied our procedures (see Finding #3). Corizon did not design and effectively implement internal control procedures that would have facilitated its compliance with the alternative housing services requirements contained in Section 2.3 paragraphs 16b of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.
Effect:	Transferring nonviolent inmates to alternative housing helps the inmates prepare for reintegration into society as productive members, helps to prevent Jail overcrowding, and saves taxpayers money as housing inmates in alternative housing facilities is less costly than housing them in the Jail. Corizon's failure to respond timely to the Jail's medical clearance requests delays the transfer of inmates (who have otherwise been approved for transfer) to alternative housing. This results in higher costs to the County (taxpayers) and makes it more difficult for the Jail to manage the inmate population. Corizon has not complied with the alternative housing services requirements contained in Section 2.3 paragraph 16b of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Schedule of Findings and Responses

Recommendations: We recommend that Corizon management take steps to ensure that the physical and mental health stability clearances on inmates being considered for transfer to alternative housing placements are consistently addressed on a timely basis and signed by the practitioners. This should involve ensuring that adequate personnel resources are applied to the medical clearance process, and the performance of supervisory review procedures to verify that medical clearance requests are consistently addressed in a timely fashion.

We recommend that the Jail hold Corizon accountable for addressing physical and mental health stability clearances within 5 business days.

Management's

Response: Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office

Comments: We are pleased that Corizon is implementing our recommendation.

Schedule of Findings and Responses

Finding #13: Corizon Has Not Provided Inmates with Required Re-Entry Services

Criteria: Section 2.3 paragraphs 12 and 13 of Request for Proposal for Allegheny County Jail Health Care and Related Services (RFP #6975) indicate that “the Provider will be engaged in fully supporting the continuity of care process by assisting the ACJ [Allegheny County Jail], as necessary, in reentry planning.” The Provider is required to complete applications for medical coverage (including Medical Assistance applications), create discharge plans that detail the needed post release care, provide an adequate supply of required medications to accommodate the transition of care to a community provider, clear inmates for discharge, and assist the Jail in making post release referrals for continuing care.

Condition: We selected a sample of 60 inmates for testing of Corizon’s compliance with the re-entry services requirements. We selected only one release or transfer of each inmate during the period to which we applied our procedures for testing. We determined that 1 of the inmates we selected for testing was not provided healthcare services by Corizon (other than the mandatory intake screening, medical history, and physical exam) and was not prescribed any medication, and therefore a Release Summary or Transfer Summary was not included in the inmate’s medical record. However, for the other 59 of the 60 inmates we selected for testing, a Release Summary (used for releases and transfers to alternative housing or other community-based programs) or Transfer Summary (used only when inmates are transferred to other correctional institutions) should have been included in the inmates’ medical records to document any medical conditions, the medications that the inmates were released with, and any instructions provided for follow-up medical care. The Release Summary also includes a list of various community clinics that the inmates are able to utilize after their release.

- We determined that 56 of the 59 inmate medical records (95%) did not contain a Release Summary or Transfer Summary, as applicable.

Of the 60 inmates we initially selected for testing, there were 9 for which transition medication should not have been provided (the inmates were not taking prescribed medication at the time of their release or were transferred to another correctional institution that would have been required to provide the medication).

- The medical files for 36 of the 51 inmates (71%) that should have received transition medication at the time of their release or transfer did not contain any documentation to indicate that medication was provided.

Schedule of Findings and Responses

- The medical files for 7 of the 51 inmates (14%) that should have received transition medication at the time of their release or transfer contained documentation indicating the type of transition medication provided, but did not identify the number of pills provided or include instructions for use.

Of the 60 inmates we initially selected for testing, we observed that 28 claimed to have no private health insurance during the intake process. We were unable to determine whether the private health insurance maintained by the other 32 of the 60 inmates remained in force to the date of their release or transfer, because Corizon does not ordinarily verify that information. We were advised by Corizon staff that Corizon only completes or assists in completing Medical Assistance applications for inmates transferred to alternative housing. We determined that 4 of the 28 inmates claimed to have no private health insurance during the intake process were transferred to other correctional institutions.

- Corizon was unable to produce documentation to demonstrate that it had completed or assisted in the completion of the Medical Assistance applications for 21 of the remaining 24 inmates (88%) that claimed to have no private health insurance, 1 of which had been transferred to alternative housing.
- The medical records for the other 3 of the 24 inmates (12%) indicated that the inmates were already eligible and signed up for Medical Assistance although there was no evidence of this contained in the files.

Cause: This condition appears to be attributable in part to Corizon failing to apply adequate personnel resources to the provision of re-entry services (see Finding #3). Corizon also did not design and effectively implement internal control procedures that would have facilitated its compliance with the re-entry services requirements contained in Section 2.3 paragraphs 12 and 13 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Effect: Failing to provide inmates with the required re-entry services does not facilitate continuity of care. Failing to provide an adequate supply of transition medications to inmates being released or transferred to alternative housing or other community-based programs could also have an adverse impact on the overall health of the former inmates. Corizon has not complied with the re-entry services requirements contained in Section 2.3 paragraphs 12 and 13 of Request for Proposal for Allegheny County Jail Health Care and Related Services, RFP #6975, which is incorporated in contract #153946 by reference.

Schedule of Findings and Responses

Recommendations: We recommend that Corizon management take steps to ensure that Medical Assistance applications are completed for all inmates released or transferred to alternative housing or other community-based programs, that all inmates taking prescription medications that are released or transferred to alternative housing or other community-based programs are provided with transition medications, and that a Release Summary or Transfer Summary is included in the medical records of all inmates treated by or provided medication by Corizon. This should involve supervisory reviews to verify that discharge plans are comprehensive and complete, that all required re-entry services and transition medications are being provided, and that release summaries or transfer summaries are completed and consistently maintained the inmate medical files as applicable.

We recommend that the Jail ensure that the external service provider engaged to monitor contract #153946 and/or ACHD periodically review inmate medical records to help ensure that all of the required re-entry services are being provided to the inmates.

Management's

Response: Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.

Controller's Office

Comments: The response on page 60, paragraph 1 states that Corizon is to assist the County in the re-entry initiative. The contract, by inclusion of the RFP, requires Corizon to complete applications for medical coverage (including Medical Assistance applications), create discharge plans that detail the needed post release care, provide an adequate supply of required medications to accommodate the transition of care to a community provider, clear inmates for discharge, and assist the Jail in making post release referrals for continuing care.

Schedule of Findings and Responses

Finding #14: Corizon and the Jail Appear to Have Engaged in Unfair Labor Practices

Criteria: Section 11.1 of contract #153946 states that “Corizon agrees to comply with all applicable laws.” Transferring, laying off, terminating, assigning employees more difficult work tasks, or otherwise punishing employees because they engaged in union or protected concerted activity is a violation of the National Labor Relations Act.

Condition: On January 30, 2014, Corizon terminated the employment of Sr. Barbara Finch, a registered nurse with over 40 years of nursing experience. Corizon has asserted that Sr. Barbara was terminated because the Allegheny County Jail had revoked her security clearance, and that having access to the Jail was a condition of her employment. The Jail’s administration has asserted that Sr. Barbara’s security clearance was revoked only because Corizon represented that Sr. Barbara’s employment was going to be terminated. It appears that neither the Jail nor Corizon are willing to accept responsibility for the termination of Sr. Barbara’s employment.

Sr. Barbara advised us that her security clearance was revoked by the Jail after she did not provide a group of diabetic inmates with insulin on a timely basis. We were made aware that a lockdown was in effect at the time Sr. Barbara was supposed to provide the insulin, and that she was denied access to the inmates until two hours before their next scheduled dosage. Sr. Barbara advised us that her decision to withhold insulin from the asymptomatic diabetic inmates at that time was based on her awareness that two doses of insulin in a two hour period could adversely impact the health of the inmates.

We observed during the performance of our procedures that the timing of Corizon’s provision of medications to the inmates varies considerably (just as an example, the “medpass” we observed to gain an understanding of the process did not occur until 40 minutes after it was intended to begin because a nurse called off sick). We reviewed the Jail’s disciplinary policy in effect at the time pertaining to the revocation of Jail security clearances, and noted that the policy does not address the revocation of security clearances in the aforementioned circumstances. We also observed that the Jail has not historically responded to irregularities in the provision of medications to inmates by revoking the security clearances of employees of the Jail’s healthcare provider.

Earlier in the same day that Sr. Barbara’s security clearance had been revoked and she had been terminated, she had attended a meeting that was mandatory for all Corizon staff at the Jail organized by Corizon management to discuss the potential unionization of Corizon’s employees at the Jail. We have been made aware that at that meeting, Sr. Barbara

Schedule of Findings and Responses

advised the other Corizon employees of an upcoming meeting about unionization and encouraged them to attend. An unfair labor practice charge was filed against Corizon in connection with the aforementioned matter, but the charge was withdrawn as an agreement was reached and Sr. Barbara returned to work at the Jail.

Cause:	Unionization involves collective bargaining, which has the potential to result in higher labor costs. Allegheny County's contract with Corizon is a fixed price contract that covers a term of up to five years. Based on this, Corizon could be adversely impacted by any increases in labor costs in the short term associated with the unionization of its employees in the Allegheny County Jail. When Allegheny County negotiates its next contract for healthcare and related services at the Jail, the healthcare provider should be expected to negotiate its compensation in consideration of the labor costs in effect at the time, which means that the County would be adversely impacted by any increased labor costs over the long term. As such, it appears that both Corizon and the Allegheny County Jail have an incentive to dissuade the unionization of Corizon's employees at the Jail.
Effect:	Based on the aforementioned condition and the appearance that Corizon and the Allegheny County Jail have a mutual incentive to dissuade the unionization of Corizon's employees at the Allegheny County Jail, a reasonable person could conclude that Corizon, in collusion with the administration of the Allegheny County Jail, has engaged in unfair labor practices. This could adversely impact the reputation of Corizon and Allegheny County, and limit their ability to attract skilled job applicants.
Recommendation:	Both Corizon's management and the administration of the Allegheny County Jail should review the provisions of the National Labor Relations Act and take steps to ensure that the rights of Corizon's employees at the Jail are not violated.
Management's Response:	Corizon's response begins on page 47 of this report. The Warden's response begins on page 62 of this report.
Controller's Office Comments:	Both Corizon and the Warden's response do not address the Controller's Office recommendation.



December 10, 2014

VIA OVERNIGHT DELIVERY AND
E-MAIL TRANSMISSION

Ms. Chelsa Wagner, Controller
Allegheny County
436 Grant Street, 104 Courthouse
Pittsburgh, PA 15219
E-Mail: chelsa.wagner@alleghenycounty.us

Re: Examination Report on Corizon Health, Inc.'s Compliance with Contract #153946 with
Allegheny County for the Period September 1, 2013 through February 28, 2014

Dear Ms. Wagner:

This letter serves as the formal written response of Corizon Health, Inc. ("Corizon Health") to the referenced report ("Report"). Corizon trusts that you will incorporate this written response, verbatim, into your final version of the Report.

Introduction

While Corizon Health does not dispute many of the statements in the Introduction, Corizon Health provides the following background information which we believe offers a more balanced and complete picture of Corizon Health's performance as a company in general and our service and commitment to the Allegheny Contract.

Corizon Health is the leading correctional healthcare provider in the nation, having more than thirty-five (35) years of correctional healthcare experience. Corizon Health has 114 clients and serves 534 facilities in 27 states. We serve an average daily population of 347,716, and we provide millions of clinical encounters annually. In regards to client retention, 80% of Corizon Health's clients have been clients for five years or more and 55% have been clients for 10 years or more. Four Corizon Health facilities were awarded National Commission on Accreditation of Health Care (NCCHC) national honors in the past five years as *Program of the Year* or *Facility of the Year* which recognizes programs and facilities of excellence among thousands of accredited correctional facilities. Notably, the Allegheny County Jail recently recognized one of Corizon Health's employees for her demonstration of extraordinary compassion in the care of a patient at the Allegheny County Jail who was in acute psychiatric distress. Corizon Health believes our staff is one of our greatest assets and strives to hire the very best healthcare providers.

Given Corizon Health's nationwide footprint and breadth of experience, we are able to improve the delivery of care using best practices from many jail systems throughout the country. Corizon Health's goal is to partner with Allegheny County Jail ("the ACJ" or "the Jail") to deliver safe, effective, and quality healthcare to our patients. Our hard working staff in our contracts across the country work to improve the level of care every day. As a healthcare company invested in evidence-based, best practice medicine, we continue to review and improve all services and delivery models from day one of each contract through its tenure. We have done so at Allegheny and will continue to do so.

Corizon Health takes our partnership with the ACJ seriously and cares deeply about the quality of healthcare it provides to the inmates at the ACJ. On September 1, 2013, Corizon Health replaced an incumbent provider who had been at the ACJ for over a decade. Notably, the Controller's audit period is the first six months of our new relationship for the ACJ.

In the experience of Corizon Health, the typical start-up process of a correctional healthcare contract is approximately three to six months. In this relationship, Corizon Health has faced several challenges from day one at the ACJ. First, Corizon Health inherited a contract from the predecessor, Allegheny County Health Services ("ACHS"), and the system needed significant and material systems and process improvements. Second, Corizon Health inherited a workforce who had been disengaged. Corizon Health has been working, and continues to work, diligently to improve the systems and processes inherited from ACHS, as well as the work culture. We are also encouraging staff to embrace Corizon Health's policies, practices and mission of providing quality inmate healthcare. While not making excuses for our performance, Corizon Health must disclose that there have been tangible, ongoing challenges that are unique to the ACJ. Corizon Health is striving to overcome these challenges while ensuring that our staff provides quality healthcare to the inmates at the ACJ.

A significant and repeated issue with the Controller's Report is that it contains conclusions and generalities that lack full substantiation and the Report has numerous subjective claims. Specifically, the Report repeatedly declares potential effects such as "risks of poor inmate health outcomes," "legal liability" and alleged "additional costs to taxpayers," among others. The Controller's Report speculates that Corizon Health's actions "can result in failures to provide inmates with needed medical care, mental healthcare and medications, and *can pose* threats to the health and welfare of other inmates and Jail staff." Of note, the Controller's Report does not cite any negative outcomes or events for any of the patients at the Allegheny County Jail.

Corizon Health has made progress in the development of the ACJ health services delivery system despite many of the challenges at the site. We are confident that ongoing improvement initiatives and collaborative partnering with the County administration and the ACJ leadership will continue to improve and enhance operations. Since inception of the relationship, Corizon Health has made the following key improvements:

- Initiated Labor Management Meetings to address employee concerns and improve employee relations;
- Conducted intensive internal reviews to monitor systems, identify training needs, corrected system breakdowns, and offer employee corrective counseling as indicated;

- Re-trained new employees via re-initiation of New Employee Orientation Module I and New Employee Orientation Module II, both very robust training courses on Corizon Health's policies and procedures for new employees;
- Provided training in infection control, disease management and nursing assessment tools;
- Re-organized the medical record room and initiated re-organization of the paper record to enhance patient care, documentation retention and chart order;
- Begun collaborative efforts with the County and the commissary vendor to implement a kiosk system to improve tracking of inmate grievances; and
- Applied for and obtained state licensure for the Drug and Alcohol Program.

Where findings are factual, we intend to utilize the findings to further train our team and improve operations.

With regard to the individual findings, Corizon Health provides the specific responses below.

Finding #1: The Jail's Monitoring and Enforcement of Contract #153946 Has Not Been Sufficient.

Corizon Health Response:

Corizon Health asserts that the County will respond accordingly regarding its oversight of Corizon Health's Contract with the Jail. However, Corizon Health maintains that the County has overseen Corizon Health and our adherence to the contract obligations in a diligent and consistent manner. Initially, the Warden met daily with Corizon Health's Health Services Administrator. Since contract inception, Corizon Health leadership has met weekly with the Jail administration and representatives from the Allegheny County Manager's Office to review contract performance. Within the framework of these weekly meetings, the ACJ administration and County representatives engaged in activities related to monitoring and oversight of the contract. Additionally, County representatives have conducted internal reviews of medical records. Corizon Health also cooperates in monthly oversight meetings with the Jail Oversight Committee, and has participated in many one-on-one meetings with Judge Donna Jo McDaniel to discuss contract compliance and clinical issues.

Corizon Health disagrees with the Report's statement that Corizon Health was known to have a history of significant litigation related to quality of patient care issues pertaining to its provision of healthcare services at correctional institutions at the time of selection. The Report does not list any specific examples of Corizon Health litigation. Having provided correctional healthcare services for more than thirty-five years, Corizon Health has gained unique knowledge and experience allowing for the administration of the most effective risk management available. Notably, for the five (5) year period ending June 30, 2012, Corizon Health averaged only 1.04 lawsuits per 1000 inmates under our care. Furthermore, despite the litigious nature of the correctional healthcare industry, Corizon Health has only been subjected to one lawsuit since the inception of this Contract. Notably, the inmate in this case is not represented by counsel. Finally, Corizon Health is aware of at least fifty-two (52) lawsuits filed against ACHS during their tenure at the ACJ.

Finally, Corizon Health takes issue with the Controller's speculative statements. For example, comments such as "a failure to effectively monitor contract #153946 has exposed the county to the unnecessary risks of poor inmate health outcomes, legal liability related to inadequate or improper inmate healthcare provided by

Corizon Health...” lack factual basis and appear to be misleading. Corizon Health is fully committed to working with Allegheny County to continue to fulfill the Contract obligations and afford the inmates with quality care. Corizon Health will continue to work collaboratively with the contract monitors or whomever the County may appoint.

Finding #2: The Allegheny County Jail Is No Longer Accredited by the *National Commission on Correctional Health Care*, Corizon Health Has Not Complied with Reporting Requirements, and Corizon Health Should be Penalized for Failures to Meet Performance Standards.

Corizon Health Response:

As to the issue of NCCHC re-accreditation, the Report is correct that the ACJ is no longer accredited by the National Commission on Correctional Health Care (“NCCHC”). The Controller, however, misunderstands, misconstrues or misrepresents the reasons for the lack of re-accreditation.

It is important to note that Corizon Health assumed responsibility for the provision of inmate healthcare at the ACJ in September 2013, approximately seven months after the ACJ was due for its February 2013 NCCHC re-accreditation survey. The prior vendor, ACHS, requested a postponement of the February 2013 survey with its agreement to complete the survey by year’s end. Needless to say, Corizon Health inherited an aggressive timeline and commitment due to the inaction of the prior healthcare provider to meet specific deadlines.

In November 2013, Corizon Health reached out to NCCHC for consultation. Upon Corizon Health’s request, NCCHC conducted a Technical Assistance visit in December 2013 to offer direction and advice concerning the accreditation process. After careful review, NCCHC recommended that the ACJ withdraw from accreditation and re-apply for a full accreditation survey the following year due to problems with ACHS’s documentation. In March 2014, the ACJ administration provided official communication to the NCCHC to withdraw from accreditation.

The Report’s conclusion that the County’s lack of timely and effective monitoring of Corizon Health contributed to a failed pursuit of re-accreditation has absolutely no factual basis. Clearly, the short window within which Corizon Health was required to accomplish re-accreditation was overly aggressive. The aggressive timeline that Corizon Health inherited from ACHS coupled with ACHS not transferring to Corizon Health the necessary documentation to complete the accreditation and the numerous start-up challenges put Corizon Health in a position where it was impossible to properly assist the ACJ in achieving re-accreditation. Although a survey date has not been set, Corizon Health has resumed discussions with the National Commission surveyors Tracey Titus and Dr. Brett Gibson to discuss the application process and recommendations for next steps. Corizon Health leadership is also working in concert with the ACJ administration to develop a plan of action and timeline to complete a full survey and re-secure accreditation. Specific to this initiative, interdisciplinary work groups comprised of Corizon Health and County Jail staff, as appointed by the Warden, have already been established and are moving forward with the preparation process.

Accreditation remains one of Corizon Health's primary priorities and one of our site administrations' major initiatives. Corizon Health's policies and procedures at the ACJ are written in compliance with NCCHC standards. Hence, despite the ACJ's NCCHC status, Corizon Health site administration and staff strive to meet these standards daily in all aspects of clinical care.

Corizon Health has worked diligently with the ACJ on NCCHC accreditation since the beginning of the Contract. The \$20,000 penalty that the Controller suggests should not be assessed because there is no finding that Corizon Health failed to meet essential or important standards with resultant loss of accreditation.

To the Auditor's second issue concerning reporting requirements, Corizon Health has continuously worked with the ACJ administration and the County representatives to modify weekly and monthly metrics, and with the Jail administration to augment the Oversight Report and mental health data to meet the needs and requests of all stakeholders. Corizon's continuous re-tooling of the Monthly Health Service Report to offer the County an annual roll-up and month-by-month comparison is just one example of how Corizon Health has worked diligently to be a responsive partner.

Corizon Health and the County have redefined the reportable statistics required since the beginning of the Contract. Corizon Health has always reported medical and behavioral health statistical data to the County on a monthly basis since the inception of the Contract. The Report highlights that Corizon Health did not provide a September 2013 Prison Board Monthly Data Report. Corizon Health assumed the Contract in September 2013 so the September data was reported in the October 2013 report.

Finding #3: Corizon Health Has Not Maintained the Required Staffing Levels.

Corizon Health Response:

Corizon Health has provided direct care staffing hours above and beyond the staffing matrix, and has continued to do so since the inception of the Contract.

Corizon Health concludes that the audit methodology is flawed as it does not accurately reflect all hours worked for the shifts selected by the Controller. The Report's findings do not appear to include the hours worked by agency nurses, locum tenens hours, as well as additional hours worked by site management and non-Allegheny based management staff who was temporarily assigned to the contract.

Below, for your review, is an example of our direct care staffing levels that exceed Corizon Health's contractual obligation. This Table represents a compilation of hours for the period subsequent to the contract transition period identified in the Controller's Report as December 1, 2013 through February 28, 2014. The roll up of total hours worked is taken from Corizon Health's Payroll system which reflects productive work hours for which the clinical staff has been paid:

Month/Year	RN Overage	RN Hours Applied to Backfill	Variance (hours above matrix after backfill for vacant hours)
December 2013	1942.20	224.36	1717.84
January 2014	1425.17	613.51	811.66
February 2014	1265.41	506.76	758.65

The variance column, above, reflects the total number of Registered Nurse hours beyond the contracted matrix that was provided to the ACJ for each designated month. Therefore, Corizon Health was providing staffing above and beyond what was required in the staffing matrix. Notably, Corizon Health was not compensated additional monies for these hours.

Corizon Health acknowledges there have been some staffing challenges with this Contract. First, in the early transition months, as mentioned before, Corizon Health was faced with an inherited staff that was resistant to changing to a new healthcare provider. Second, there was much unjustified criticism of Corizon Health in the media which hampered recruitment efforts. Despite these challenges, through the duration of the Contract, Corizon Health has consistently made every effort to recruit, hire, train and attract staff. Specifically, Corizon Health has done the following:

- Advertised in local papers;
- Posted positions on Career Builder and regular website postings on corrections websites;
- Attended job fairs;
- Initiated sign on and referral bonuses to attract qualified candidates;
- Utilized locums, agency and voluntarily paid overtime rates
- Voluntarily added MD hours to meet operational needs;
- Held weekend interviews for Registered Nurses, Licensed Practical Nurses and Medical Assistants; and
- Extended an offer to a locums Psychiatrist to become a full-time Corizon Health Employee.

The Controller's determination that Corizon Health "has an incentive to lower its costs to increase the profit it realizes under the Contract" is misplaced. As demonstrated above, Corizon Health has gone above and beyond to staff the Contract with more hours than required under the Contract.

Corizon Health is committed to providing staffing in compliance with the Contract and to meet the expectations of Allegheny County. Corizon Health will continue with the specific actions outlined above along with other recruiting practices throughout the term of the Contract. Corizon Health will also continue to assess staffing needs to ensure adequate staffing to provide the community standard of care at the ACJ.

Finding #4: Corizon Health Has Not Maintained Complete and Accurate Inmate Medical Records and Has Not Begun Implementing Electronic Medical Records as Required.

Corizon Health Response:

Corizon Health has been working to improve the fragmented, inefficient medical record system that ACHS had in place when Corizon Health began the Contract. Prior to an Electronic Medical Record ("EMR") implementation, Corizon Health deemed it critical to understand work flow processes and existing medical record systems. Absent such vital data, Corizon Health had concerns that the implementation of the Electronic Medical Record would be compromised.

Corizon Health has made reasonable efforts to ensure that all medical records are accessible when services are provided, and that all applicable confidentiality and record retention standards and regulations are met.

In December of 2013, Corizon Health hired an outside expert to evaluate and make recommendations regarding medical records. Based on the expert's conclusions, Corizon Health made the following system-wide improvements:

- Re-organized the medical records department for improved access to records (the current medical records room was cramped and inefficient);
- Reconfigured medical filing shelves for efficiency;
- Created "out" cards for medical records;
- Re-tooled charts with six part dividers; and
- Created pre-filled blank records in advance of intake to ensure completeness and improve accessibility and efficiency for staff.

Documentation is fundamental to any healthcare system. To this end, Corizon Health reemphasizes the importance of proper documentation at staff meetings and takes action for any employee who fails to adequately document.

Contrary to the Report, Corizon Health has worked with the County and their IT Team to create a written plan for implementation of the Electronic Medical Record System. We are having regular EMR Progress Meetings with the ACJ administration and have developed a timeline with an implementation date of no later than August 1, 2015.

Finding #5: Corizon Health Could Not Produce Documentation to Evidence That Intake Health Assessments Were Conducted for Newly-Admitted Jail Inmates As Required

Corizon Health Response:

As a correctional healthcare company, Corizon Health recognizes the importance of the intake process to the overall health of an inmate population. Corizon Health has taken aggressive efforts to retrain staff and streamline intake to enhance staff competence and reinforce the critical nature of performing the intake process. At the end of the first ninety (90) days of transition into the Contract, Corizon Health implemented the Veterans' Information Form as part of the intake process. Going forward, Corizon Health has captured all the required documentation as outlined in the RFP.

As noted, Corizon Health has devoted significant resources and energy toward improving intake operations to ensure quality care and patient safety. Corizon Health will continue to make strides and improvements in the intake area and has tasked our Director of Nursing ("DON") and Assistant Director of Nursing ("ADON") with providing ongoing intake focus studies as part of Corizon Health's quarterly comprehensive quality improvement initiatives. Corizon Health will continue to monitor this to provide feedback to the County on improving outcomes and benchmarking our performance. Completion of required documentation, compliance with timeliness of processes, operability of medical equipment and regular medical equipment checks as well as evaluation of best practices to enhance clinical outcomes will continue to be areas of quality review.

Chronic care conditions are identified at various points during the History and Physical Process. Corizon Health utilizes a disease management manual to identify and treat chronic care conditions within appropriate timelines.

Since the inception of the Contract, Corizon Health has provided policies and procedures related to the identification of inmates with mental health issues. Mental health specialists round intake every four hours to determine the potential healthcare needs of the mentally ill and establish preliminary treatment plans. Corizon Health is in the process of reviewing and adopting all behavioral health policies and procedures for quality improvement and standardization of mental healthcare at intake.

Finding #6: Corizon Health Has Not Provided Inmates with Required Clinical Care.

Corizon Health Response:

The Report does not cite any cases of concern or provide objective data to support the allegations regarding clinical care. It is important to note that even if an inmate did not receive a History and Physical within fourteen (14) days, Corizon Health did continue to address his/her clinical care needs in many different venues. For example, our caregivers continued to generate patient orders, provide patient encounters, and continued to support patient care through sick call, specialty consultations and offsite referrals, as deemed necessary.

Corizon Health is by no means dismissing any shortcomings in clinical care nor are we minimizing the challenges we have experienced in this Contract. Notably, Corizon Health has repeatedly invested in providing additional clinical and administrative staff to meet inmate healthcare needs. As mentioned in the response to Finding #3 above, Corizon Health's time-keeping reports consistently reflect clinical coverage hours provided well in excess of the staffing matrix. This further substantiates Corizon Health's commitment to patient service and optimal clinical care.

With the implementation of Corizon Health protocols and utilization practices, site providers have been able to provide a higher level of service and care on-site. Resultant reductions in unnecessary off-site care and transport have been gradual over time but with more significant decreases in unnecessary off-site transfers occurring approximately ten months after contract inception. Supporting data is as follows:

2014 Average Utilization (per 1000 patient days annualized)

Jan-June IP: 235 (high of 356, low of 123)

July-Nov IP: 140 (high of 243, low of 14)

Jan-June ER: 64 (high of 88, low of 14)

July-Nov ER: 58 (high of 75, low of 19)

Jan-June offsite: 123 (high of 189, low of 63)

July-Nov offsite: 72 (high of 84, low of 56)

The success of this initiative has undoubtedly saved the taxpayers money by utilizing our staff and resources to their maximum potential thereby reducing unnecessary transports out of the ACJ.

The Report asserts that there were missing medication orders and inadequate documentation. Corizon Health chose to adopt several existing software systems upon contract award one of which was intricately tied to the efficient ordering of medication ("Rao interface"). While Corizon Health initially believed that the adoption of the Rao Interface would facilitate a smoother transition, Corizon Health has since come to appreciate the inherent limitations and inadequacies of the medication ordering system. Corizon Health has been in communication with both the pharmacy vendor and our IT Department to attempt to address interim modifications to the medication ordering system pending implementation of the EMR.

Corizon Health continues ongoing efforts to address clinical care and medication management to improve the quality of care provided inmates at the ACJ. Corizon Health initiated an ongoing internal review process to monitor care, identify systems improvements and address concerns timely. This initiative has resulted in a short-term solution for managing History and Physicals ("H&Ps"). In order to address the timely management of History and Physical examinations, Corizon Health has implemented recommendations for system changes to eliminate backlogs and the creation of new treatment areas on the pods to increase and expedite provider access to inmates. The Corizon Health administration continues to work collaboratively with the ACJ Administration to streamline the History and Physical and sick call processes. Noteworthy is Corizon's performance which over the last few months has reflected a 60% improvement in management of

H&P backlogs, an 85% improvement in management of sick call backlogs, and a 68% improvement in management of mental health backlogs.

Lastly, the implementation of the EMR is in progress with a developed timeline and an implementation date projected for August 1, 2015. The Corizon Health Information Technology Department is working closely with the ACJ Information Technology Department and external stakeholders to identify system challenges and begin to address areas of concern. Corizon Health is confident that it can more effectively meet the challenges inherent in an EMR roll-out now than it could have six (6) months ago.

Finding #7: Corizon Health Did Not Comply with Pharmacy Management Requirements.

Corizon Health Response:

Corizon Health has complied with the pharmacy management requirements but recognizes there is room for improvement. Corizon Health has subcontracted with PharmaCorr, a nationally recognized correctional based pharmacy. PharmaCorr provides a consulting pharmacist who performs monthly reviews of the pharmacy services. Corizon Health has added a Pharmacy Tech to the ACJ staffing matrix. Corizon Health has also implemented count procedures to help ensure procurement and administration of medication meet state and Federal standards. Red book counting procedures for controlled substances were implemented for tracking and control.

Prior to Corizon Health taking over the Contract, the facility pharmacy did not have checks and balances for its inventory counts and there was unlimited access for all nursing staff. Corizon Health immediately rectified this problem through limiting access and increasing accountability. Corizon Health implemented procedures for safety and security of medications. National resources were deployed to bring the pharmacy processes up to an acceptable standard. New policies and procedures were implemented and training of all nursing staff was completed.

The Talyst pill dispensing machine that the previous vendor left behind was not functioning and its software was outdated. Corizon Health, at our own expense, installed a new Hub for Talyst, updated its software, refurbished the machine and implemented staff training on its usage.

Corizon Health site leadership made the decision to postpone implementation of Talyst until more pressing issues were addressed and resolved. However, recently, Talyst support has provided on-site training of staff and completed “super user” training for designated staff who will assume that role. Per the request of the Director of Nursing additional training for new staff has also been scheduled.

Finding #8: Corizon Health Has Not Ensured the Readiness of Emergency Equipment and Supplies.

Corizon Health Response:

Corizon Health disagrees with the findings in the Report related to the readiness of emergency equipment and supplies. Notably, the Report focuses on the statement that if emergency equipment is not operating correctly that, the lives of inmates are “at risk,” and speaks of the potential for a “substantial adverse impact on the overall long-term health of inmates.” However, the Report fails to mention any adverse outcome related to the readiness or availability of emergency equipment and supplies.

Since the inception of the Contract, Corizon Health has improved the readiness of emergency equipment and supplies. Corizon Health performed our own internal audit that identified inconsistent emergency equipment inspections. In order to rectify this situation, Corizon Health has made the Assistant Director of Nursing responsible for the weekly inspection and documentation regarding the readiness of emergency equipment and supplies. Corizon Health has also placed supplies on a declining inventory system and supplies are automatically ordered one (1) month in advance of need. Corizon Health ensures that management performs weekly par level reviews of emergency equipment. Corizon Health is committed to ensuring emergency equipment and adequate supplies are available onsite at the ACJ.

Finding #9: Corizon Health Could Not Produce Documentation to Evidence Pre-Placement Health Assessments and Medical and Mental Health Rounds Were Performed for Inmates in Segregation.

Corizon Health Response:

Segregation is a custody housing status used for administrative reasons. Therapeutic seclusion is a clinical form of segregation used in the situation when an inmate is a danger to himself/herself or others. Corizon Health and the ACJ must work collaboratively to ensure proper notification of an inmate’s housing status changes.

When an inmate is placed on administrative segregation by custody, the ACJ needs to notify Corizon Health in order for Corizon Health to initiate segregation rounds. When Corizon Health inherited the Contract, the nursing administrative segregation rounds were an informal process. Nursing Administrative Segregation rounds were only documented in the correctional officer’s post unit log, stating that the nurse entered the unit. The Administrative Segregation inmates are in “lock down” twenty-three (23) hours a day. Rounds are made on the Administrative Segregation floors by a nurse who goes cell to cell to check inmate status. Charts were not pulled for this process unless the inmate was identified as being in need of care.

This process has since changed. The current process has two (2) separate approaches to addressing Administrative Segregation and Therapeutic Seclusion rounds. Administrative Segregation rounds are now documented in the Nursing Administrative Log Book that is maintained for tracking purposes. Inmates in Therapeutic segregation are housed in a Behavioral Health Pod (housing unit). The behavioral health nurses have been trained on Corizon Health policy and procedure on documentation for both types of segregation, and Corizon Health has implemented restraint check forms. Continuous Quality Improvement studies are

conducted quarterly to ensure compliance with the policy and procedure for documenting segregation. The ADON now spot checks and monitors this process weekly during her daily rounds.

Finding #10: Corizon Health Could Not Produce Documentary Evidence to Demonstrate that an Appropriate Triage Process Was Used to Prioritize Inmate sick call Requests.

Corizon Health Response:

Corizon Health has had a unique challenge in establishing a consistent method for the collection and triage of sick call slips. For the first few months of Corizon Health's start-up, sick call slips were appearing in the interoffice mail box in the medical administrative area, making it impossible to appropriately manage and track inmate requests for service. After reviewing the fragmented process, Corizon Health streamlined the procedures to ensure confidentiality and access to care, in accordance with NCCHC standards. As we receive over one hundred sick call requests daily, the sick call process was a critical yet daunting system for Corizon Health to address.

Despite challenges during the ninety day transition period, Corizon Health worked aggressively to effect needed change. As a result, the following standardized sick call practices were implemented:

- Only nurses are permitted to access sick call slips via a locked sick call box in the housing pods;
- Third shift nurses are assigned the responsibility for collecting the sick call slips daily;
- Upon receipt, the triage nurse(s) date stamps the sick call slips and enters them on the sick call log;
- The triage nurse(s) then review and sorts the sick slips in accordance with consideration for priority status and provider discipline (i.e. dentist, MD, NP, etc.) (part of "triage process");
- The triage nurse(s) separate the requests according to department and/or discipline;
- Finally, the triage nurse(s) then deliver the slips to medical records staff that then locate and prepare the records for the next scheduled sick call Clinic.

Finding #11: Corizon Health Has Not Responded to Inmate Medical Grievance Timely.

Corizon Health Response:

Corizon Health has worked with the ACJ administration to improve the turnaround time and tracking of the grievance process. Specifically, Corizon Health has done the following:

- Implemented Grievance Tracking Log;
- Provided a grievance standard operating procedure for processing grievances which include a mechanism for date stamping and logging grievances upon receipt and assigned the DON as the Grievance Coordinator; and
- Ensured grievance responses are current.

Corizon Health continues to ensure management of grievances is one of our top priorities and a primary focus for discussion with the ACJ administration. In particular, Corizon Health has specifically reviewed the time gap between the ACJ's receipt of grievances and the turn-around time for delivery to Corizon Health administration. Corizon Health is also exploring a kiosk system in conjunction with custody and the commissary vendor. A kiosk system would streamline the process making it more efficient. Corizon Health has also recently ensured that grievance tracking numbers and a copy of the Grievance Log are distributed at the weekly Warden's Meeting for review.

Finding #12: Corizon Health Has Delayed the Assignment of Inmates to Alternative Housing.

Corizon Health Response:

Corizon Health supports the ACJ's Alternative Housing Program as a positive pathway for successful re-integration of inmates back into the community. While admittedly challenged to meet the five (5) day time frame for medical and mental health clearances during contract transition, Corizon Health worked diligently to address this issue and improve performance. Though vacant provider hours contributed to an inability to meet initial clearance timelines, Corizon Health's compliance improved over time as staffing stabilized. Corizon Health's voluntary matrix increase of MD hours has certainly been a contributing factor to the improvements experienced with expedited Alternative Housing placements. Additionally, a more stable mental health workforce has also helped to improve Corizon Health's compliance with Alternative Housing clearances.

Corizon Health continues to prioritize clearances and strives to meet the demands of the service. To provide oversight and monitoring, the Health Service Administrator now meets daily with the Alternative Housing Coordinator to troubleshoot referrals and ensure timely clearances. Such oversight has provided more program stability and consistency and provided assistance to the Alternative Housing Coordinator who is tasked with coordinating the medical and mental health reviews.

As Corizon continues to move forward to improve our performance in this area, we are exploring the option of expanding the pool of providers responsible for clearances to better meet the program criteria. Consideration is being given to adding Advanced Practice Registered Nurses to the pool of practitioners trained to perform clearances. Additionally, Corizon Health is also exploring internal resources to determine if additional staff may be utilized to serve as back-up support for Alternative Housing and as relief staff to ensure on-going coverage during periods of staff absences.

Finding #13: Corizon Health Has Not Provided Inmates with Required Re-Entry Services.

Corizon Health Response:

As a point of clarification, per the RFP language, Corizon Health *assists* the County and Justice Related Services (“JRS”) in the re-entry initiative to include assuring appropriate medication ordering, preparing and packaging inmate medications for transfer, and completing inmate discharge summaries for continuity of care. Corizon’s responsibility for Medical Assistance applications is limited to only those patients being released to Alternative Housing.

To manage and coordinate the release process, Corizon Health developed standard operating procedures (“SOP”) to guide the Discharge Planner in preparing inmates for discharge. Of note in the SOP, Corizon Health specifically manages Alternative Housing patients and drops off Medicaid applications to the Service Coordination Unit. The Discharge Planner routinely prepares the Health Sustaining Medication Assessment form for inmates being released to JRS.

Finding #14: Corizon Health and the Jail Appear to Have Engaged in Unfair Labor Practices.

Corizon Health Response:

Contrary to the Report, Corizon Health has not engaged in any unfair labor practices (“ULP”) at the ACJ, nor has the National Labor Relations Board (“NLRB”) found Corizon Health to have engaged in any unfair labor practices at the ACJ. Corizon Health terminated Sister Finch on January 31, 2014. Following the termination of Sister Finch, her bargaining unit filed an unfair labor practice charge with the NLRB. Corizon Health and the bargaining unit worked cooperatively on a resolution. Ultimately, Sister Finch was brought back to work by Corizon Health at the ACJ. There was no finding that Corizon Health had engaged in an unfair labor practice. Moreover, other than the Sister Finch issue, there were no other ULPs or other complaints issued by the union against Corizon Health for our conduct during the union campaign and the parties have been bargaining cooperatively in good faith to reach an initial contract. Finally, Corizon Health works cooperatively with all employees regardless of union or non-union affiliation in all of our contracts across the country, and we will continue to do so.

Conclusion

Corizon Health has achieved many accomplishments in the Allegheny Contract and expects that improvements will continue in the months and years ahead. We are fully committed to working collaboratively with the ACJ County Jail administration, County Representatives, and other representatives as appointed by the County. Corizon Health can only hope that our stakeholders will fully promote our efforts to solidify gains, as objective monitoring continues.

We are well aware that we have significant work ahead of us but are confident that bolstered by our dedicated team of professionals, and only with the County’s continued collaboration, we will achieve our shared goals. Corizon Health is up for the challenges and asks that you support us as we work to provide the best healthcare possible for our patients.

If you have any questions concerning our response, please feel free to contact me directly.

Sincerely,

A handwritten signature in blue ink that reads "Susan Schranze" followed by a stylized flourish.

Susan Schranze, LICSW
Chief Operating Officer / Northeast Region

cc: Woodrow A. Myers, Jr., M.D., Corizon Health CEO
Ms. Lori Churilla, Assistant Deputy Controller, Allegheny County
(via e-mail to lori.churilla@alleghenycounty.us and via Fed-Ex)
Honorable John DeFazio, President, County Council
Honorable Nicholas Futules, Vice President, County Council
Honorable Rich Fitzgerald, County Executive
Mr. William McKain, County Manager, Allegheny County
Ms. Jennifer Liptak, Chief of Staff, County Executive
Mr. Warren Finkel, Budget Directory, Allegheny County
Mr. Joseph Catanese, Director of Constituent Services, County Council
Mr. Walter Szymanski, Budget Directory, County Council
Honorable Donna Jo McDaniel, President, Allegheny County Jail Oversight Board
Ms. Nadia Lazo, Member, Allegheny County Jail Oversight Board
Ms. Gayle Moss, Member, Allegheny County Jail Oversight Board
Honorable Sheriff William Mullen, Member, Allegheny County Jail Oversight Board
Dr. Claire Walker, Member, Allegheny County Jail Oversight Board
Honorable Joseph Williams, Member, Allegheny County Jail Oversight Board
Dr. Karen Hacker, Director, Allegheny County Health Department
Dr. Lee Harrison, Chair, Allegheny County Board of Health
Mr. William Youngblood Vice-Chair, Allegheny County Board of Health
Dr. Donald Burke, Member, Allegheny County Board of Health
Ms. Joan Cleary, Member, Allegheny County Board of Health
Mr. Anthony Ferraro, Member, Allegheny County Board of Health
Dr. Kotayya Kondaveeti, Member, Allegheny County Board of Health
Dr. Joylette Portlock, Member, Allegheny County Board of Health
Dr. Edith Shapira, Member, Allegheny County Board of Health
Dr. Ellen Stewart, Member, Allegheny County Board of Health

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

December 10, 2014

The Honorable Chelsa Wagner
Allegheny County Controller
104 County Courthouse
436 Grant Street
Pittsburgh, PA 15219

Re: Examination Report on Corizon Health, Inc.'s Compliance with Contract #153946 with Allegheny County for the Period September 1, 2013 through February 28, 2014

Controller Wagner:

Thank you for the opportunity to respond to your Report titled "Examination Report on Corizon Health, Inc.'s Compliance with Contract #153946 with Allegheny County for the period September 1, 2013 through February 28, 2014." As a preliminary matter, we believe that the review conducted by your office after only six months of such challenging services for a new vendor, succeeding a previous vendor of 12 years, is unconventional at best and that your report is not representative of the transition progress which has been made.

When I was appointed Warden in October of 2012, one of the first and most frequent concerns I heard from various stakeholders was related to the medical services being provided by the contracted provider of inmate healthcare services at that time, Allegheny Correctional Health Services, Inc. (ACHS).

ACHS had been engaged since mid-2000; the contract with the provider had a very general, undefined scope of services and no contractual limits on spending. In fact, the County had advanced ACHS over \$1,000,000 over their 12 years of service, of which \$270,000 had to be written off by the County when ACHS dissolved in 2013. In addition, payments to ACHS greatly varied and have increased from \$6.9M in 2003 to \$12.9M in 2012, a total increase of 88.9% or an average of 9.9% per year. It was clear to me as Warden that it was necessary to issue a Request For Proposals (RFP) for these services with the current vendor being welcome to participate in that process.

The Jail went through a vigorous and thorough RFP Process to assess and select a vendor for medical services for our inmate population which averages approximately 3,000 inmates per day (including those in alternative housing) and a total of over 30,000 new commitments and releases each year. A consultant with over 30 years of relevant experience was engaged to assist with the development of the RFP which was issued in early 2014. Working through the County Manager's office, a multi-disciplinary evaluation team was formed which included: two medical doctors, the President Judge of the Court of Common Pleas, the Chief of Medical Operations for the City of Philadelphia corrections system, and representatives from the County Jail administration, County Department of

Human Services, County Executive's office, County Manager's office, County Department of Budget and Finance and the County Law Department.

We received six proposals for these services. After numerous vendor presentations and discussions, the committee unanimously selected Corizon Health Inc. to provide inmate healthcare services. Being mindful of the need to select a vendor with sufficient experience in transitioning from one vendor to another, we noted that Corizon has 35 years of correctional health care experience and provides services in 27 states for hundreds of thousands of inmates in hundreds of jails and prisons each day. The resulting contract with Corizon included a first year annual base payment of \$11.5M and an annual Consumer Price Index (CPI) increase based on the Pittsburgh medical care component of the CPI not to exceed 4.25%. The contract is for an initial two year term beginning September 1, 2013 with options to renew for the three subsequent years.

It is widely acknowledged in the field of corrections that Jail inmate medical care services is a complex and challenging service, but an important service for any correctional facility. I can personally attest to that with over 26 years' experience in the field. The transition to a new vendor after 12 years of service by the predecessor vendor for 3,000 inmates is a significant undertaking with numerous obstacles and challenges. ACHS did not submit a proposal to continue providing service but, rather, participated in the unsuccessful proposal of another vendor. Perhaps because ACHS did not submit a proposal, many of their leadership staff left the company and/or did not come to work at the Jail on a regular basis as their contract came to an end and ACHS dissolved. While much of the ACHS line staff was retained by Corizon, the change to a new provider for this service resulted in transitional issues as noted in your report that have been primarily resolved. The contract with Corizon began on September 1, 2013 and the Controller's audit engagement letter was dated February 28, 2014, for a six month review of the contract.

We acknowledge that Corizon has had various transfers in and out of their management team at the County Jail during the first year of service which has contributed somewhat to a lack of stability and that stability is important to their delivery of service and communication with my staff. Corizon has recognized this as a concern and has committed to address this issue and to provide stable leadership staff on-site at the Jail. In addition to daily interaction with Corizon staff, representatives from the Jail leadership and the County Manager's office have weekly meetings with Corizon management to work through concerns and issues as they arise and we are continually working cooperatively to enhance the delivery of inmate healthcare services.

The entire Jail leadership team has been involved in some capacity with interaction and monitoring aspects of Corizon services. After a year into this service contract with a new vendor, I have assessed this transition effort and determined that additional monitoring resources are needed. In November, 2014, I created and posted a new Jail position titled "Healthcare Contract Monitor." The person filling this role will be focused fully on the contracted medical services and will also serve to enhance the monitoring function. We are currently interviewing candidates for this position.

Of particular note, the Allegheny County Bureau of Corrections is presently accredited by the American Correctional Association (ACA), which is a three (3) year accreditation. We received full American Correctional Association (ACA) accreditation on July 23, 2012, which means we have

successfully complied with all performance based standards, expected practices and outcome measures, pertaining to the operation of the facility and providing quality health care services to offenders within our jail. The performance-based standards for correctional health care were conceived and developed by health care and security professionals. With regard to accreditation by the National Commission on Correctional Health Care (NCCHC), we made the joint decision along with Corizon not to seek renewal of accreditation. That process was to occur during the summer and fall of 2013, at the same time that we were seeking proposals and transitioning to a new provider of inmate healthcare services. After discussion with NCCHC, and learning that any renewal would be based upon a review of the prior three years of experience, we advised NCCHC that we preferred to have a full survey and seek accreditation after the first full year of service by our newly selected provider, Corizon. We have established a joint working committee comprised of representatives of Jail administration and Corizon staff to seek NCCHC accreditation.

The last finding of the audit regarding the alleged violation of the National Labor Relations Act, as well as the conclusion and recommendations reached, are disingenuous, misleading and, quite frankly, insulting. The narrative of the finding ignores the fact that the unionization process in question occurred between Corizon and its employees. The Jail's only involvement in this process was in making space available to the union and employees for meetings and to vote, even though doing so was contrary to existing policy. The fact that an exception was made underscores the importance that the County administration places on the right to organize.

Based on the narrative, it seems as if this entire section was based on an isolated complaint that was later withdrawn, rather than there being a pattern or having a basis in fact. It is disappointing that professional auditors would find that a singled-out incident would be sufficient to include in this report. In fact, to have auditors who have no role in labor contract negotiating or administering make such an allegation is an overreach given their lack of knowledge on the topic. The suggestion that the County would engage in such behavior to ensure that labor costs did not impact the overall price of the contract is not only inaccurate but inappropriate in a report of this type.

Lastly, we will certainly take all of the recommendations in your report into consideration. As with all County departments, we welcome any suggestions that add value to our operations and we are committed to working with Corizon to fulfill its mission of providing health care to our inmate population.

Sincerely,

Orlando L. Harper 12-10-14

Orlando L. Harper, Warden
Allegheny County Bureau of Corrections



ORLANDO L. HARPER, WARDEN
ALLEGHENY COUNTY JAIL
950 SECOND AVENUE • PITTSBURGH, PA 15219
PHONE (412) 350-2000 • (412) 350-2032
WWW.ALLEGHENYCOUNTY.US