

INTEROFFICE MEMORANDUM



TO: Fulton County Board of Commissioners
FROM: Anthony Nicks, County Auditor
DATE: January 11, 2021
SUBJECT: NaphCare, Inc. Follow-up Review

In accordance with the 2020 approved Audit Plan, the Office of the County Auditor performed a follow up review of the Fulton County Jail's medical contract with NaphCare, Inc. (NaphCare). This review was conducted to determine if adequate measures were taken to resolve the findings and the recommendations addressed in our prior audit report dated December 30, 2019.

The objectives of the review were to assess the adequacy of the measures taken to resolve prior findings, and to evaluate the corrective action plan and any supporting documentation to validate the progress as it relates to the deliverables for the NaphCare contract. We also assessed whether proper practices were followed in accordance with the National Commission on Correctional Health Care Standards for Health Services in Jails and NaphCare's policies and procedures.

Due to the upcoming changes of the Fulton County Jail administration, we opted to rely on the Fulton County Jail National Commission on Correctional Health Care accreditation report dated April 3, 2020 to determine if any of the findings and recommendations noted in our audit report were addressed and/or implemented, per the accreditation team. There are thirty-nine (39) essential standards applicable to the Fulton County Jail and thirty-eight (38) were found to be in full compliance and one (1) was found to be non-compliant, regarding suicide prevention and intervention.

The scope of the audit was January 1, 2019 – December 31, 2019.

Additionally, our audit of the Fulton County Medical Contract with NaphCare identified eight (8) weaknesses. The current status of the eight (8) weaknesses are addressed as follows:

| | Findings | Recommendation | Corrective Action Plan | Current Status |
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| 1 | Lack of Oversight of the Intake Process | We recommend that NaphCare ensures all inmates receive pre-booking screenings prior to being booked into the Fulton County Jails. | NaphCare's Corporate intake process changed to be compliant with the NCCH Standards in 2018. | According to section J-E-02; <i>Receiving Screening</i> of the accreditation report, all compliance indicators were fully met in regards to inmates |

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| | | | | receiving pre-booking screenings (receiving screenings), prior to being booked into the Fulton County Jails. |
| 2 | Sick Call Requests not Properly Documented | We recommend that the nursing staff ensure the proper execution of all sick call requests, from initial receipt to final disposition. | NaphCare's Corporate sick calls process changed to be compliant with the NCCH Standards in 2018. | According to section <i>J-E-07; Nonemergency Health Care Requests and Services</i> of the accreditation report, all aspects of the health care request process, from review and prioritization to subsequent encounter are documented, dated and timed were fully met. |
| 3 | Incomplete Sick Call Requests | We recommend that NaphCare implements a monthly review process of the <i>NaphCare Medical Department Sick Call Request-Managed by Techcare Forms</i> . | NaphCare's Corporate sick calls process changed to be compliant with the NCCH Standards in 2018. | According to section <i>J-E-07; Nonemergency Health Care Requests and Services</i> of the accreditation report, all aspects of the health care request process, from review and prioritization to subsequent encounter are documented, dated and timed were fully met. |
| 4 | Lack of Mental Health Screenings | We recommend that the staff of NaphCare perform all receiving and mental health screenings during the intake process in order to comply with the contract deliverables as well as <i>NaphCare's policies and procedures</i> . | Mental Health screenings are performed during the intake process. However, there are various places within the TechCare system where documentation is noted. | According to section <i>J-F-03 Mental Health Services</i> and section <i>J-E-02 Receiving Screening</i> of the accreditation report, all compliance indicators were met in regards to performing mental health screenings during the intake process. |
| 5 | Lack of Documentation (HIV Treatment) | We recommend that NaphCare implements a recordkeeping system that exhibits inmates diagnosed with HIV infection or AIDS that received at least a four (4) day supply of medication upon release. A collaborative effort should also be made to execute a system that allows all pertinent parties to be alerted of an inmate's release. Additionally, NaphCare should consider revising the terms of the contract to accurately reflect the process of prescribing and distributing | It is NaphCare's policy to provide a four (4) day supply of medication to all of our chronically ill patients, which would also include any court ordered medications. We will also give a 30 day prescription. However, we need to be notified in a timely manner, preferably 48hrs, so that medications can be dispensed from our corporate pharmacy. | According to section <i>J-F-01 Patients with Chronic Disease and Other Special Needs</i> of the accreditation report, all compliance indicators were fully met in regards to documentation for HIV treatment. |

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| | | HIV/AIDS medication to inmates that are discharged. | | |
| 6 | Untimely Responses to Complaints and/or Grievances | We recommend that NaphCare comply with the terms of the contract and consider allocating additional resources to processing the medical complaints/grievances received. | According to NaphCare’s policy and procedure, for any emergent health care complaint, we have 5 business days from receipt to respond in writing. All other routine Health care complaints, we have 10 days of receipt to respond. | According to <i>section J-E-07 Nonemergency Health Care Requests and Services</i> of the accreditation report, compliance indicators were partially met in regards to the frequency and duration of response to health service requests being sufficient to meet the health needs of the inmate population. However, <i>section J-A-10 Grievance Process for Healthcare Complaints</i> were fully met. |
| 7 | Inadequate Recordkeeping | We recommend that NaphCare ensures all programs, reports and forms are completed in their entirety. We also recommend the incorporation of supervisory reviews to mitigate erroneous and incomplete submissions. | This discrepancy occurred secondary to these grievances being medical grievances. All were responded by medical and forward to the grievance officer, which grievance officer responses are not shared with medical. | According to <i>section J-A-08 Health Records</i> of the accreditation report, all compliance indicators were fully met, in regards to proper recordkeeping. |
| 8 | No Inventory Log for Over-the-Counter Medication | In order to comply with the contract deliverables, we recommend that NaphCare implements an inventory system to properly account for all over-the-counter medications. | The pharmacy will now post a list with par levels of all over-the-counter medications. | According to <i>section J-D-02 Medication Services</i> of the accreditation report, all compliance indicators were fully met in regards to properly logging over the counter medications. |

CONCLUSION

As a result of our review, we have concluded the discrepancies between contract language, NCCHC Standards and NaphCare’s policies and procedures, noted in our audit dated December 30, 2019, were implemented and in agreement with the National Commission on Correctional Health Care accreditation report dated April 3, 2020. We will continue to monitor the implementation of NaphCare, Inc.’s corrective action plan of the Fulton County Jail’s medical contract.

Cc: Richard “Dick” Anderson, County Manager
Sharon Whitmore, Chief Financial Officer
Anna Roach, Chief Operating Officer
Alton Adams, Deputy Chief Operating Officer
Patrick Labat, Sheriff