

Rx for Better Inmate Health Care: Jail Inmate Health Survey Supports Delivery of a Community Standard of Care

By Rodney Ballard, Director, Lexington Fayette Urban County Government, Division of Community Corrections, Lexington, Kentucky, with Connie Clem, Editor, National Jail Exchange

Acknowledgement:

Portions of this article are adapted from *Inmate Satisfaction Survey Regarding Medical Services*, a final project report submitted in September 2014 to the Lexington Fayette Urban County Government, Division of Community Corrections, by Dr. Melissa Moon, Department of Political Science, Criminal Justice and Organizational Leadership, Northern Kentucky University, Highland Heights, Kentucky.

What does it mean for a jail to provide inmate medical health care that meets prevailing community standards?

We used this question as a springboard here at the Lexington Fayette Urban County Government (LFUCG), Division of Community Corrections. We wanted our medical services not only to perform up to our community's standard of health care, but to provide inmates a care experience that felt like they were in a community health clinic setting, not a jail. And we wanted to measure the effectiveness of what we were doing.

After completing several projects to improve our inmate health care system, we brought in a researcher from an area university to survey our inmates and get their views. The results were very positive. Beyond these basic findings, the survey results gave us many other insights and have been an asset in unexpected ways. The survey has proved to be very useful, in fact, so that we are sharing our story with other agencies that may want to do something similar.

System and Facility Improvements

Like a traditional doctor's office, the Division of Community Corrections medical health care provider employs a staff of nurses that is led by a physician. The provider team sees inmates for a variety of medical issues. Needs range from colds, allergies, high blood pressure, and medication refills to more complex medical issues like cancer, heart attacks, diabetes, high-risk pregnancies, and other life-threatening conditions.

Our agency constantly strives to improve jail operations in general and in the area of inmate medical care in particular. We are making headway with Affordable Care Act (ACA) enrollments, and we went live in January 2013 with an electronic medical records (EMR) system that pushes inmate medical records to a publicly managed state database. That database is the Kentucky Health Information Exchange (KHIE), managed by the Division of Kentucky Electronic Health Information within the Cabinet for Health and Family Services. (See sidebar.) This is very helpful for coordinating care across the public health care system. When the connectivity is totally completed, the Division of Community Corrections will be pushing and pulling medical data to/from a comprehensive statewide system.

In the spring of 2013, we remodeled our Medical Unit to serve our inmate population. The remodeled unit is clean and well organized, and we did our best to make it feel like any other doctor's office. The walls are painted in bright tones of white and green, contrasting with the beige and tan shades used in the main jail. The physician's diploma is displayed on the wall, and the health care provider's mission statement is posted on the wall in the waiting room for all to read.

The Medical Unit also displays free health pamphlets addressing a variety of topics, such as high blood pressure, diabetes, and sexually transmitted diseases. Overall, we feel we've done a good job of making the Medical Unit mirror a doctor's office or urgent care facility in our community.

We trained all of our medical staff on how to interact with their clients/inmates as a medical patient rather than just an inmate, by doing things like introducing themselves just as they would in a community professional setting. At the same time, while we want the medical staff to be friendly and approachable, they aren't there to give the inmates everything they request. Instead, medical staff should take the time to explain to clients why or how they arrived at their medical decision.

EMR Advances

Kentucky Governor Steve Beshear issued an Executive Order in August 2009 to launch the development of the Kentucky Health Information Exchange (KHIE). Funding support was received from both the Centers for Medicare and Medicaid Services and the American Recovery and Reinvestment Act (ARRA).

Kentucky received more the \$9 million to advance the use of electronic health information exchange and support eligible healthcare providers across the state in achieving Stage 1 meaningful use of certified technology. Eligible providers who demonstrate meaningful use of certified EMRs began receiving incentive payments in January 2011.

Today, KHIE is administered by the Division of Kentucky Electronic Health Information in the Cabinet for Health and Family Services. KHIE provides a common, secure infrastructure to support the exchange of electronic health information. The KHIE architecture meets national standards to ensure interoperability across various health systems and connectivity to the National Health Information Network. Core components of KHIE include a master-patient index, record-locator service, security, provider-user authentication, logging, audits and alerts.

Once we had completed the remodeling, medical staff training, and new procedures, we wanted to know whether our work was paying off and if our jail's health care met, exceeded, or lagged behind the expectations of its clients/inmates. We brought in a researcher from an area university to find out by surveying our inmates.

Launching the Inmate Survey

I came up with the idea of surveying inmates after a recent visit to my local hospital. In every waiting room area there were survey post cards requesting information on visitors' experiences at the hospital. Secondly, I noticed how well the waiting areas and treatment areas were decorated. The environment made the hospital look organized and professional. Hospitals obviously want to make their place of business attractive and professional looking. I asked myself, if hospitals can do this, why can't a jail medical unit? From this evolved the idea of training medical staff to new performance standards and developing a survey to measure our success.

As an alumnus of Northern Kentucky University, I got to know Dr. Melissa Moon, a faculty member in the Department of Political Science, Criminal Justice and Organizational Leadership. Dr. Moon agreed to help out with the survey project, and together we developed the survey instrument. The medical contractor had no input into the questions or the format of the survey and was not involved in distributing or collecting the completed surveys.

The final survey was two pages in length. It asked about the treatment clients/inmates received at the Medical Unit, about the staff's performance, and about inmates' interactions with nurses and doctors. Questions also addressed the cleanliness of the facility and demographic factors about who the Medical Unit was serving. A copy of the survey instrument is provided at the end of the article.

After planning and development, we launched the survey in May 2013 and allowed it to run through July 2013. Inmates visiting the Medical Unit were eligible to participate. Upon check-out, inmates were asked by a corrections officer assigned to the Medical Unit if they would like to fill out a survey. Inmates who visited the unit more than once were asked not to fill out a survey if they had already completed one. Completed surveys were placed in a locked box that only I could access. The completed surveys were delivered to Dr. Moon, and she completed her independent analysis.

Survey Results

A total of 258 inmates completed the survey. The results gave us a great deal of valuable information about the professional and clinical environment of the Medical Unit and the inmates' satisfaction with the care provided. The Medical Unit received high marks on whether the doctor properly diagnosed the illness/injury, explained the treatment plan, and answered all questions. Overall levels of satisfaction with the doctor and the nursing staff were high.

Multivariate analysis also revealed some significant differences in how our facility and its care were viewed by different demographic groups within the inmate population.

Environment and professionalism

Inmates' evaluations of the facility and the professional conduct of Medical Unit personnel were very positive overall.

- Most inmates (95%) rated the cleanliness and condition of the Medical Unit positively. This includes a 54% excellent rating, 25% very good, and 16% good.
- Correctional staff in the Medical Unit lobby received ratings of 66% excellent, 22% very good, and 9% good.
- More than 80% of inmates reported that the nurses and doctors they saw did introduce him- or herself.
- More than 90% said the nurse was able to answer his or her questions.
- More than 80% agreed or strongly agreed that the doctor was able to answer all their questions. Only 3% disagreed or strongly disagreed with this statement.
- More than 75% agreed or strongly agreed that the doctor properly diagnosed their illness or injury. Only 6% disagreed or strongly disagreed.
- More than 80% agreed or strongly agreed that the doctor was able to explain their illness or injury to them. Only 3% disagreed or strongly disagreed.
- More than 85% agreed or strongly agreed that the doctor did a good job of explaining their treatment plan. Only 3% disagreed or strongly disagreed.

Satisfaction with Care

Inmates' evaluations of the medical care provided also were for the most part positive.

- 88% reported that the treatment they received was excellent, very good, or good. The breakdown was 45% excellent, 26% very good, and 17% good. Only 7% said their treatment was fair, and 4% said it was poor.
- Almost 95% of responding inmates were satisfied with the care provided by their doctor. The breakdown of responses was 52% very satisfied, 31% satisfied, and 11% somewhat satisfied. Only 6% of the inmates reported some level of dissatisfaction with the doctor.
- Nearly half of respondents (49%) said the medical staff was excellent, 25% said they were very good, and 17% said they were good. Only 6% said that medical staff performance was fair, and just 2% said it was poor.

In a survey section inviting open-ended comments, roughly 85% of the survey comments were positive toward the medical unit and the care provided.

- “The medical care I received far exceeded my expectations. I assumed because it was jail that the medical care would be second rate and it wasn’t. They did a great job!”
- “The entire medical staff was as usual helpful, friendly, and most knowledgeable about all my issues/questions.”
- “Their outgoing and upbeat attitudes are extremely refreshing so I look forward to each visit here with them. Thanks again.”
- “Everything was done in an orderly fashion and instead of being treated as an inmate I was treated with respect and hospitality.”
- “While visiting with the doctor and medical staff I was treated very nicely. They were professional and thorough in all their assistance they gave me at my visit.”
- “The nurses were courteous and helpful with questions about the \$ of any fees for visit today. Thank you!”
- “The nurses and Dr. are always friendly and professional to me.”

Not all comments were positive. About half of the critical comments related to wait times to see the doctor. Medication management was mentioned as an issue by some respondents. A few inmates said that staff members were unprofessional or impolite, and a handful said their medical issue had not been resolved.

- “The nurses couldn’t tell me why my meds are all messed up, and she can’t fix it.”
- “They never gave me my seizure meds while I was here. And my blood pressure med is not the right milligram.”
- “Takes a long time from time sick form filled out till able to see doctor. Took 1 week this time. This I see now is a major problem.”
- “I think if an inmate asks to see a nurse or doctor, they should see them right away, not almost two weeks later. Other than that, great.”
- “In the future, I think it would be very helpful for a sick call to be determined quicker than 3 or 4 days later. We are human and if we were sick and hurting then we need medical attention now instead of later”

Demographic Variables

A multivariate analysis uncovered some statistically significant findings on the satisfaction reported by different inmate demographic groups. However, there were no statistically significant results for the dependent variables of sex, race, age, education, marital status, and living situation on 1) whether the doctor properly diagnosed the illness/injury, 2) whether the doctor explained the treatment plan, 3) whether the doctor answered all questions, 4) the overall level of satisfaction with the doctor, 5) the cleanliness of the facility, or 6) the rating of the correctional staff in the Medical Unit.

An inmate's reported living situation showed the strongest correlation with their survey responses on the quality of the medical staff.

- Inmates who were homeless at the time they were incarcerated gave the Medical Unit staff the highest scores. Among this group, 46% rated the medical staff as excellent, and 46% reported the staff as very good.
- Renters rated the medical staff next most highly, with ratings of excellent at 55% and very good at 29%.
- Inmates who lived with family/friends rated their care as excellent (50%), very good (23%), or good (24%).
- Those who reported their living situation as "other" gave ratings of excellent (44.4%), very good (11%), good (33%), and fair/poor (11%).
- Inmates who owned their own home gave the medical staff lower ratings: excellent (32%), very good (24%), good (27%), and fair/poor (16%). We interpret this as indicating that homeowners are more likely to carry private health insurance and to choose their healthcare providers prior to incarceration.

Interpreting and Applying the Survey Results

The data collected from our survey clearly indicated we were meeting and exceeding the medical needs of our client/inmate population. Not only that, the survey results have been an asset in other ways.

- By conducting an independent survey, we were able to evaluate how clients/inmates felt about our health care provider. The survey is a scientific way to analyze the services provided by our health care provider. In essence we created a "report card" for our health care provider.
- Additional surveys will be conducted in the future to compare and contrast results. But more importantly, the survey tells the health care provider we are not afraid to ask our clients/inmates for their opinion on how they are medically being treated. This forces the health care provider to be on their toes every day.
- In the past, jail administrators could only give their own opinion to the public and to inmates' families about the quality of medical health care provided for clients/inmates. Today I can say, "Read this report and see what my clients/inmates say about their health care."
- We plan on using the survey results in communications regarding legal cases and with the media. For example, we can respond to complaints about the quality of inmate medical care by sharing our survey evidence that most clients/inmates are very satisfied with their health care.

- We've used the survey results in training medical staff on the procedures and attitudes that convey the caring, medical nature of the clinic and in evaluating our training.

The overwhelming point is that improving medical and correctional officers' interpersonal communication skills, along with a few gallons of paint, can have a drastic and positive effect on your inmate population—at little or no cost.

Appendix: Survey instrument

The survey instrument is following this page

Document available at:

http://community.nicic.gov/blogs/national_jail_exchange/archive/2015/01/21/rx-for-better-inmate-health-care-jail-inmate-health-survey-supports-delivery-of-a-community-standard-of-care.aspx

The National Jail Exchange is an ongoing electronic journal focusing on providing information to jails practitioners. This blog is funded by a contract from the National Institute of Corrections, U.S. Department of Justice. Points of view or opinions stated in this document are those of the authors and do not necessarily represent the official position or policies of the U.S. Department of Justice.

To write an article or to learn more about the National Jail Exchange, visit the homepage for this journal at: <http://NICIC.gov/NationalJailExchange>.

Lexington Fayette Urban County Government Division of Community Corrections

⌘ Inmate Medical Questionnaire ⌘

Directions: Please check the box that best corresponds to your opinion.

1. What is your sex? <input type="checkbox"/> Male <input type="checkbox"/> Female
2. What is your age? ____ (write in)
3. What is your race? <input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Latino <input type="checkbox"/> Other
4. What is your highest education level? <input type="checkbox"/> Did not finish high school <input type="checkbox"/> Some college <input type="checkbox"/> High school diploma <input type="checkbox"/> College degree <input type="checkbox"/> GED
5. What is your marital status? <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other
6. Before you came to jail, what was your living situation? <input type="checkbox"/> Homeless <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Live with friends or family <input type="checkbox"/> Other
7. Did the Nurse introduce him/herself to you? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure/don't remember
8. Did the Nurse answer your questions? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not understand <input type="checkbox"/> Not sure
9. Did the doctor introduce him/herself to you? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure/don't remember
10. I believe the doctor properly diagnosed my illness/injury. <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Neutral <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
11. The doctor explained my illness/injury to me. <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Neutral <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
12. The doctor explained the treatment plan for my illness/injury. <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Neutral <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
13. The doctor answered all the questions I had about my illness/injury. <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Neutral <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
14. My overall level of satisfaction with the doctor was: <input type="checkbox"/> Very <input type="checkbox"/> Satisfied <input type="checkbox"/> Somewhat <input type="checkbox"/> Somewhat <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very satisfied satisfied dissatisfied dissatisfied

15. The treatment I received while in the Medical Center was: <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
16. How would you describe the cleanliness and condition of the Medical Center? <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
17. Overall, how would you rate the Medical Staff? <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
18. Overall, how would you rate our Correctional Staff in the Medical Center Lobby? <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
19. Please provide any other comments about your visit to the Medical Center. <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

Thank you for feedback!
Please put your survey in the locked box by the door.