



Virginia Department of Corrections

CQI Public Meeting

24 June 2022 at 1:00 P.M.

In Person Meeting

Location: 6900 Atmore Drive
Richmond, VA 23225

Agenda:

- I. Call to order
- II. Roll Call of Committee Members
 - a. Committee members present: A. Wyatt; R. Provau; M. Amonette; A. Brennan; S. Herrick; D. Malone; H. Ray; J. Walters
 - b. Committee members absent: M. Cary; T. Fuller
 - c. Public: None
- III. New Business
 - a. VADOC HSU Continuous Quality Improvement Plan – Presentation by Distarti Whitehead
 - i. Presentation available at: [Reports and Publications — Virginia Department of Corrections](#)
 - b. VADOC HSU COVID-19 Timeline- Presentation by Dr. Gerald Craver and Colin Dwyer
 - i. Presentation available at: [Reports and Publications — Virginia Department of Corrections](#)
 - c. S. Herrick made a motion to enter the presentations into the record and post on DOC website, which was seconded by A. Wyatt. With no further discussion, the Committee voted 8-0 in favor.
- IV. Actions for next quarter
 - a. Recommend appropriate criteria for evaluation based on the IOM 6 Aims for Improvement for the committee's consideration of adoption.
 - b. Overview of IHI process; what the organization is, why we chose them, what we are learning from it.
 - c. S. Herrick made a motion for these proposals to be discussed at next meeting, which was seconded by R. Provau. With no further discussion, the Committee voted 8-0 in favor.

With no comments and there being no further business, the Committee adjourned at 1:45PM.



VADOC HSU Continuous Quality Improvement Plan

Presented by Distarti Whitehead

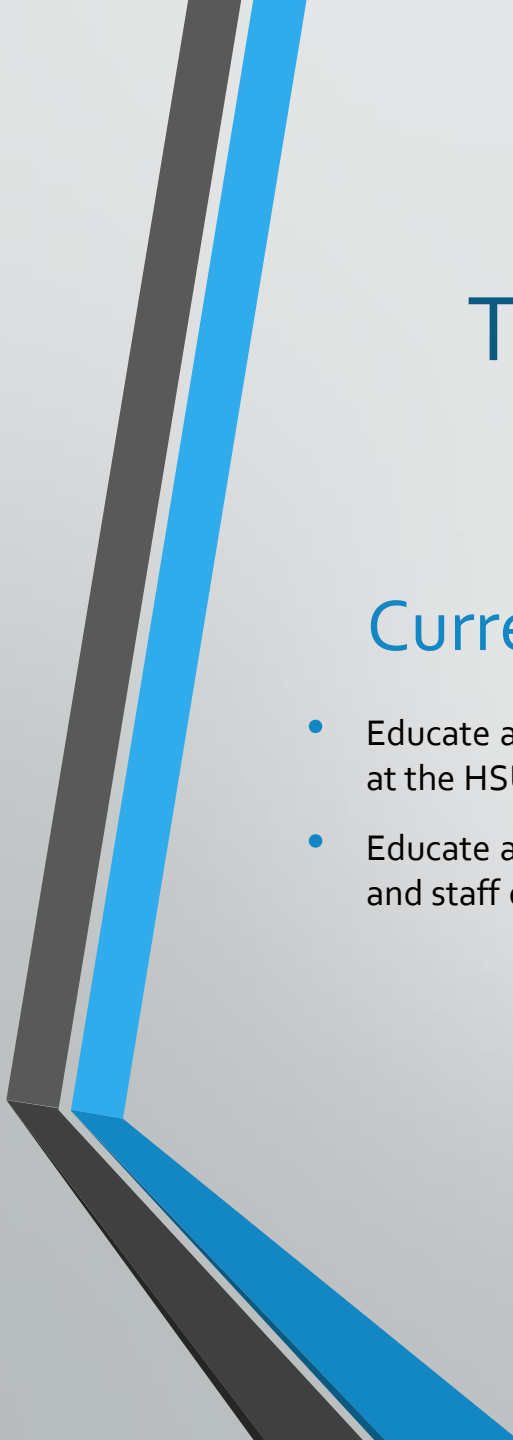
HSU Quality Improvement Specialist

June 24, 2022



HSU Mission

- To strive for excellence in health care by supporting and promoting the well-being of persons in it's custody. The primary focus is providing quality health care while being good stewards of the Commonwealth's resources.
- Is committed to providing quality health care services to offenders that respects their dignity and provides for the continuity of care. The DOC recognizes that health care is preventative as well as curative and encourages offenders to develop a responsible attitude toward their own well-being.
- The HSU systematically plans implements, monitors, and assesses all health care services provided to offenders through the CQI program to ensure organizational performance in which optimal standards are sought and improved.



Goals & Objectives

To improve the quality improvement culture throughout the HSU organization

Current

- Educate at least 100% of the staff on quality improvement at the HSU level
- Educate at least 100% of the Health Authorities, supervisors and staff on quality improvement at the facility level

Future Proposal

- Selected staff at the HSU level will take an approved online quality improvement course
- By the end of 2022 a quality improvement learning module(s) will be created by HSU
- Quality improvement learning module(s) will be available on the VLC website and/or another platform for all health care staff to take

Goals & Objectives

Current

The CQI Program's emphasis is on studying health care delivery and outcomes in areas involving:

- High risk, high acuity, high volume
- Identifying appropriate criteria to evaluate the quality of health services
- Monitor and evaluate the quality of health services provided by the DOC utilizing identified criteria
- Develop strategies to improve the quality of health care services provided by the DOC

Future Proposal

Incorporate the Institute of Medicine (IOM) 6 Aims for improvement:

Health care should be:

- Safe
- Timely
- Effective
- Efficient
- Equitable
- Patient Centered

Quality Improvement Plans

Current

- Quality Improvement Plan template that the facilities use to create their yearly QI plan

Future Proposal

Use templates from various sources to provide guidance to the staff on how to develop a:

- a) Project charter and story board
- b) Prioritization worksheet
- c) PDSA/PDCA
- d) Root Cause Analysis

Quality Improvement Plan

Current

- Identify at least one or more as needed quality improvement initiative(s) for the facility and complete one QI project to accomplish the initiative
- Complete at least one or more process/outcome study(s) per year
- Evaluate on-site monitoring of health care performance /outcomes at least quarterly
- HSU-each discipline on the CQI committee will complete one improvement project

Future Proposal

Enhance the current requirements by:

- Working with the facilities to help them identify areas for improvement
- Promote increased transparency in a positive way
- Use existing monitoring tools to assist with process studies and/or QA data collection

Quality Improvement Plan

Current

Peer Reviews

- External peer review program for physicians/practitioners, dentist, psychiatrist and mental health professionals should be completed every two years

Future Proposal

- Continue scheduling peer reviews and elicit the assistance of DOC providers to conduct the peer reviews
- Develop a competency and credentialing process
- Data from the peer reviews can be used as an outcome study for the HSU CQI program

Meetings and Reports

Current

- Quarterly CQI Meetings
- Health Services Monthly Activity Report

Future Proposal

- Provide more education and coaching to the facilities regarding items that should be discussed and documented during the CQI meetings
- Work with the facilities regarding presenting their QI projects during the quarterly meetings
- Working to update the HSMA report and the submission link.

Let's Keep Improving



Department of Corrections



Health Services Unit COVID-19 Pandemic Timeline

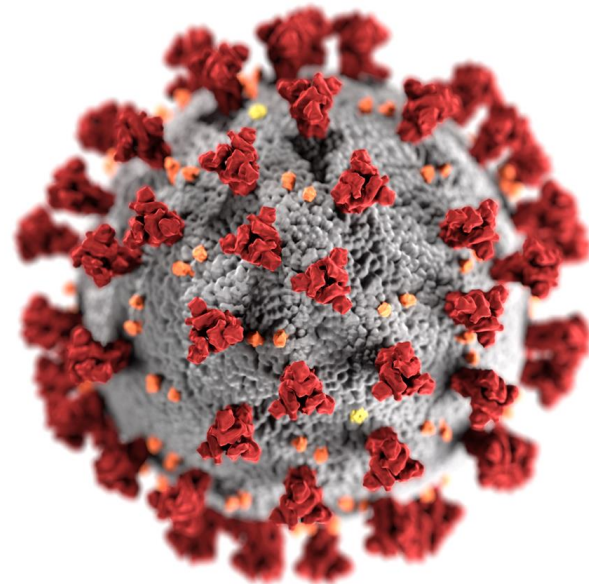
Continuous Quality Improvement Committee

DATE June 24, 2022



Presentation Overview

- Introduction and Scope
- COVID-19 Timeline
 - Timeline Overview
 - Detailed Review
- Summary
- Questions





Introduction and Scope

- Health Services Unit (HSU) Project Team:
 - Gerald Craver, PhD, Health Services Lead Analyst
 - Colin Dwyer, VCU Wilder Graduate Scholar Fellow
- Identify major health-related COVID events through multiple sources (e.g., emails, pandemic guidance, web searches, and other VADOC staff)
- Due to the large number of events occurring since COVID pandemic began, only selected events are identified

Leslie Jenkins, RN
Haynesville
Correctional Center



Virginia National Guard conducting point prevalence testing at State Farm Correctional Complex (5/27/2020).



VADOC Correctional Nurses



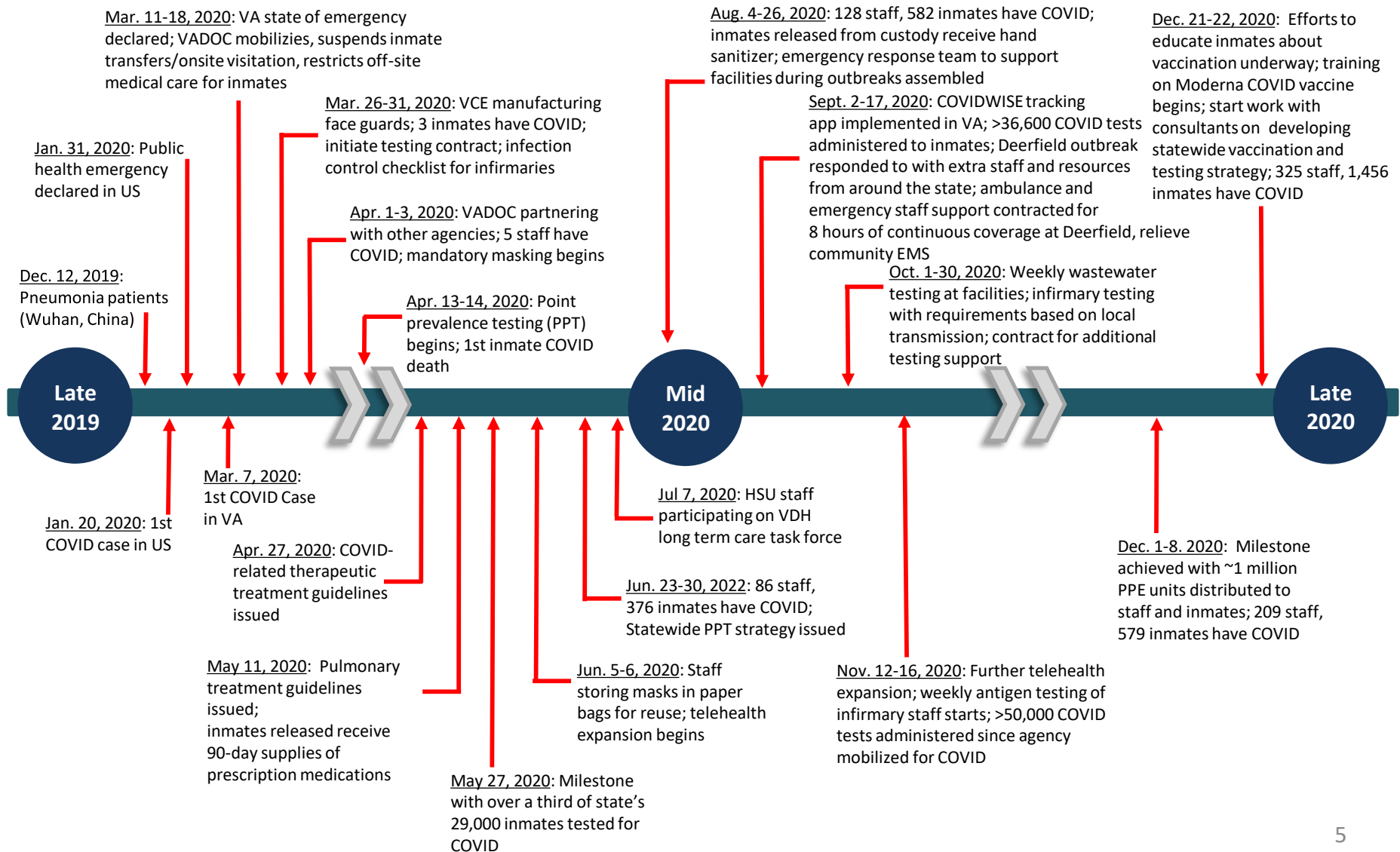
Sandra Vass, Health Authority and Deborah Dennis, Staff Nurse,
Halifax Correctional Unit #23



Dorothy Samuel, LPN, and Donna Clegg, LPN
State Farm Work Center

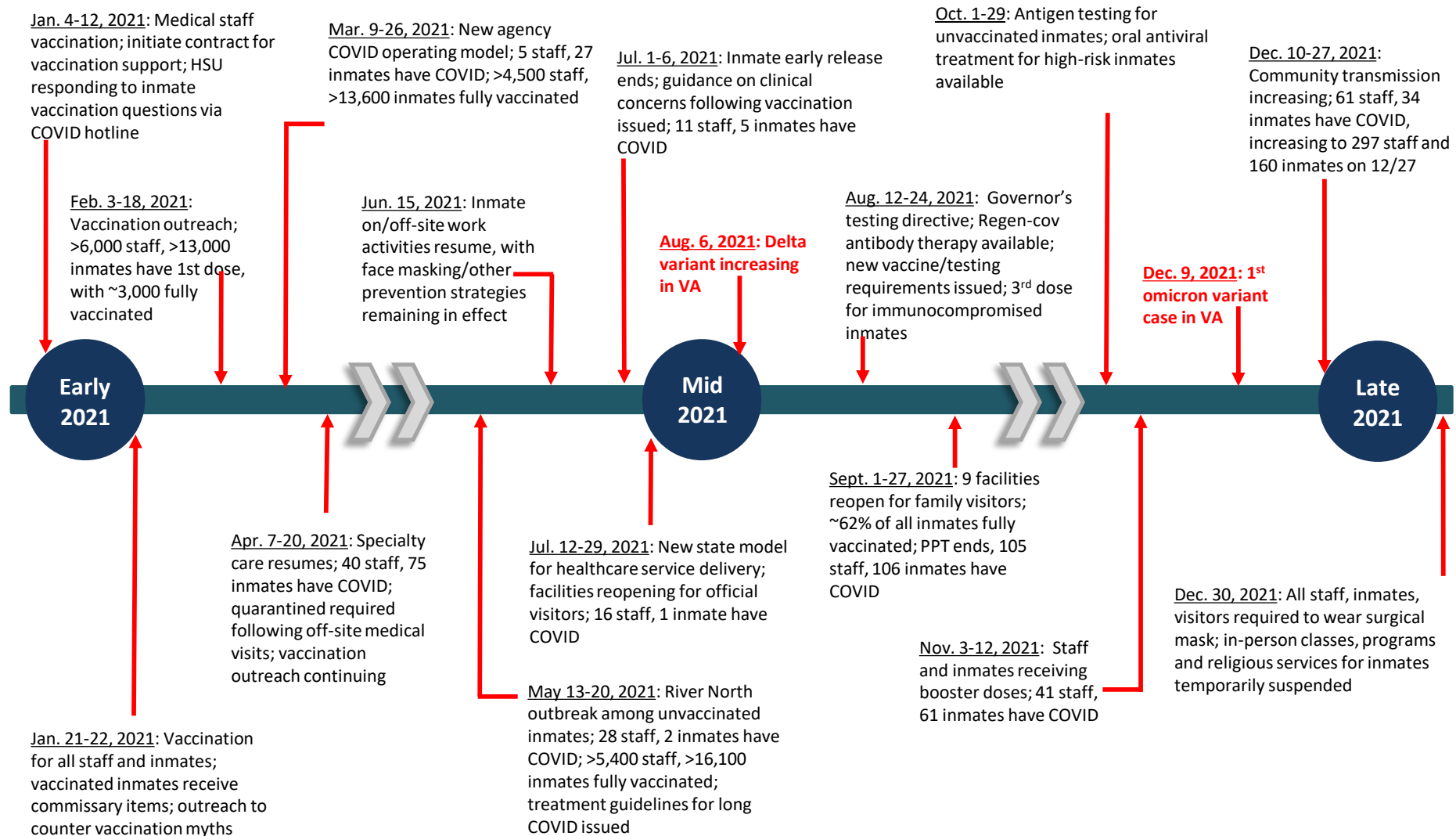


COVID Timeline Overview



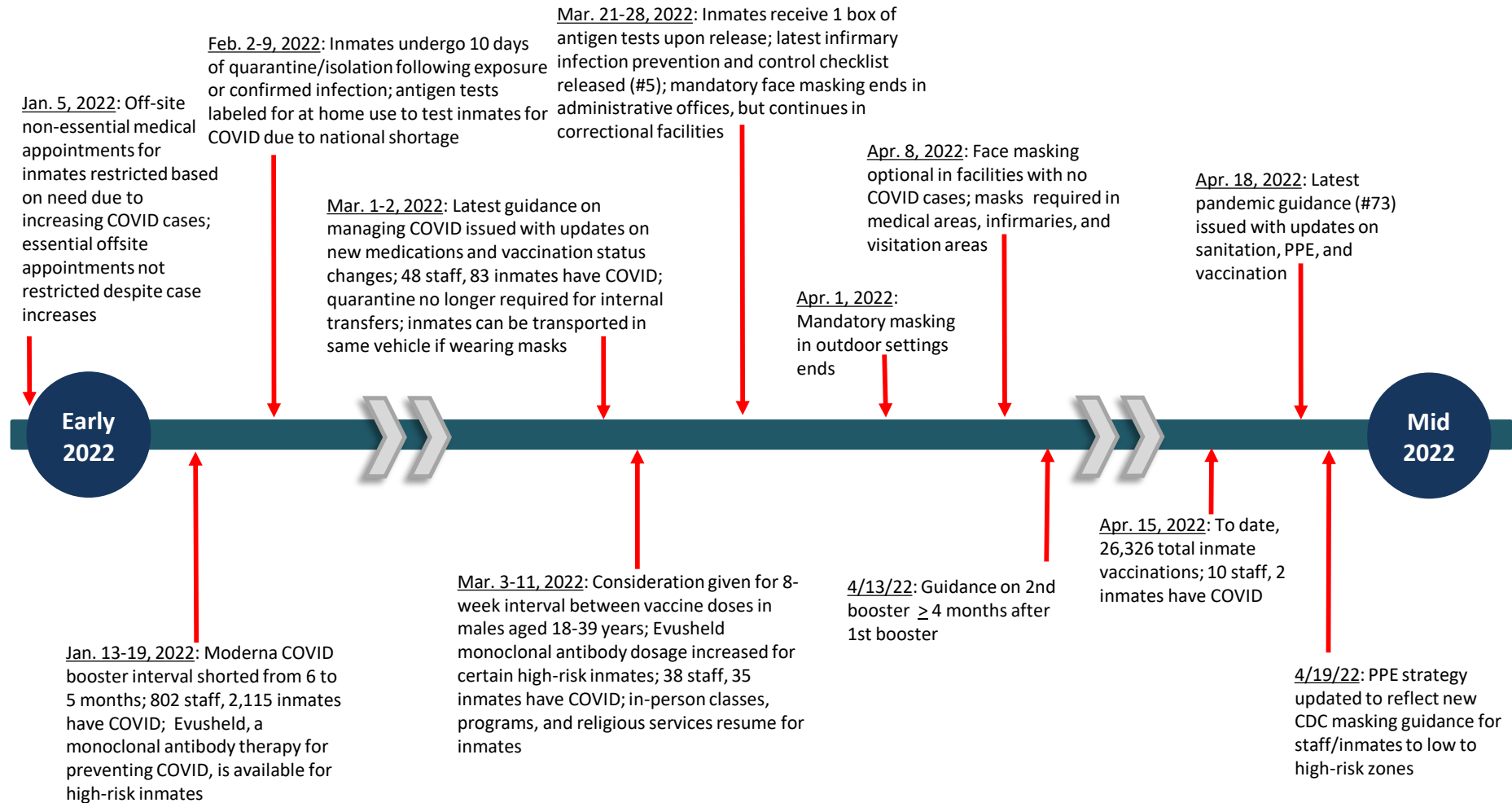


COVID Timeline Overview (Continued)





COVID Timeline Overview (Continued)



COVID-19 Artwork





Detailed Review of Timeline Events (Early 2020)

- 3/11/20: VADOC mobilizes for COVID, forms task force, develops pandemic response plan (#1); begins daily personal protective equipment (PPE) inventories; issues guidance on federally approved hand washing, sanitizing, and cleaning products
- 3/12/20: VA declares state of emergency; VADOC suspends inmate facility transfers and movement and issues guidance for procuring emergency supplies
- 3/16/20: In-person visitation for inmates suspended (video visitation, email, phone calls continue); COVID medical epidemic/pandemic sanitation plan issued (#1); nonessential staff travel canceled; virtual COVID meetings begin for medical staff
- 3/18/20: COVID screening protocols for staff and inmates issued, off-site medical appointments for inmates restricted based on need
- 3/23/20: Agency developing procedures following CDC correctional guidance to ensure continuation of essential services while protecting health/safety of staff and inmates; evaluation tool for screening inmates for COVID issued
- 3/25/20: Dental staff assisting medical units to ensure continued delivery of inmate healthcare services
- 3/26/20: VA Correctional Enterprises manufacturing face guards for staff and inmates (~15,000 are produced daily); PPE issued based on correctional facility risk stratification level (e.g., red, yellow, green zones)



Detailed Review of Timeline Events (Early 2020)

- 3/27/20: Infection prevention and control (IPC) checklist (#1) developed for infirmaries; daily COVID research updates begin for health services leadership
- 3/30/20: Social distancing and telework implemented; contract for bulk polymerase chain reaction (PCR) diagnostic testing support
- 3/31/20: 3 inmates have active COVID; cumulative COVID Questions and Answers (Q&A) update (#1) issued to staff
- 4/01/20: Mandatory face masking and social distancing initiated statewide; teledentistry crisis 24-hour remote support coverage contract begins
- 4/2/20: Outside non-essential medical appointments for inmates suspended; routine appointments and chronic care continue onsite
- 4/03/20: Agency collaborating with VDEM, VDH, VCU, UVA, National Guard, Armor Correctional Health, and other organizations; 5 staff have active COVID; guidance on inmate cohorting, medical rehydration therapy, and PPE optimization strategies issued
- 4/11/20: VCU hospital treating inmates with severe COVID
- 4/13/20: Point prevalence testing (PPT) begins; COVID training for medical staff initiated through UVA; COVID signs/symptoms and PPE tip sheets issued to medical staff
- 4/14/20: Operational protocols (#1) issued to facilities following correctional guidance (#1); 1st inmate dies due to COVID



Detailed Review of Timeline Events (Mid 2020)

- 4/26/20: Medical guidelines updated with guidance on managing confirmed/suspected COVID cases; early release begins for certain inmates
- 4/27/20: Because no federally approved medications for COVID exist, VADOC issues therapeutic treatment recommendations (e.g., convalescent plasma) to medical staff
- 5/8/20: Clinical management training for COVID provided to medical staff
- 5/11/20: Guidance on COVID-related pulmonary treatment issued; inmates released from state custody receive 90-day supplies of prescription medications
- 5/20/20: Medical guidelines revised with latest updates on isolation, quarantine, and inmate facility/hospital transfers
- 5/27/20: Agency has tested over a third of its 29,000 inmates for COVID, a level not achieved in most prison systems and other congregate settings across US
- 5/29/20: Basic PPE required for staff during all dental procedures, with N95 face masks required for procedures generating aerosols
- 6/5/20: Due to PPE shortages, all VADOC staff directed to store face masks in paper bags
- 6/10/20: Access to care for inmates is expanded through telehealth enhancements
- 6/23/20: 86 staff and 376 inmates have active COVID



Detailed Review of Timeline Events (Mid 2021)

- 6/30/20: Statewide point prevalence strategy for COVID testing released
- 7/9/20: Health service staff participating on VDH long term care task force
- 7/16/20: Medical staff are the only staff authorized to release inmates from quarantine
- 8/4/20: 128 staff and 582 inmates have active COVID
- 8/14/20: Inmates released from state custody receive a 4 oz. bottle of hand sanitizer
- 8/26/20: Nursing emergency response team formed to support facilities during COVID outbreaks, team is deployable statewide within 12 hours of notification
- 9/2/20: VA becomes first state to implement COVIDWISE, a free COVID exposure notification app; agency staff encouraged to download and use app
- 9/12/20: VADOC working with partners to manage outbreak at Deerfield Correctional Center housing mostly elderly inmates with serious health conditions in a nursing home environment; >36,600 COVID tests administered to inmates
- 9/15/20: Contract initiated to provide ambulance and emergency staff support at Deerfield Correctional Center
- 9/17/20: Following CDC guidance, all VADOC dental clinics classified as red zones, the agency's highest risk stratification level



Detailed Review of Timeline Events (Late 2020)

- 9/25/20: Health services staff providing updates to agency leadership on CDC and VDH nursing home guidance to support infirmaries
- 10/1/20: VADOC collaborating with VDH for wastewater testing to monitor staff and inmates for COVID, becoming one of the 1st state prison systems to use this technology
- 10/16/20: COVID testing strategy for infirmaries developed with frequency requirements based on local community transmission rates
- 10/30/20: Contract for rapid PCR testing support
- 11/12/20: Medical staff receiving equipment (e.g., iPads, webcams) to continue expanding telehealth for inmates
- 11/16/20: Weekly antigen testing of infirmary staff starts; >50,000 diagnostic tests administered to inmates since agency mobilized for COVID
- 12/1/20: Milestone achieved with ~1 million PPE units (e.g., surgical masks, gloves, gowns) distributed to staff and inmates
- 12/8/20: 209 staff and 579 inmates have active COVID
- 12/21/20: Inmate vaccination education materials issued; training on administering Moderna mRNA COVID vaccine begins
- 12/22/20: Contract to develop statewide vaccination/testing strategy; 325 staff and 1,456 inmates have active COVID



Detailed Review of Timeline Events (Early/Mid 2021)

- 1/4/21: Additional guidance on administering Moderna vaccine issued; vaccination clinics start for medical staff with second shots four weeks later
- 1/5/21: Contract for ongoing vaccination support
- 1/6/21: Training on storage and handling of Moderna vaccine and managing vaccine clinics in correctional facilities
- 1/12/21: Health service staff responding to inmate vaccination questions submitted through agency's COVID hotline
- 1/21/21: Vaccination clinics begin for all staff and inmates with 2nd shots four weeks later; vaccinated inmates receive commissary items and snacks
- 1/28/21: Outreach campaign targeted toward staff and inmates initiated to counter vaccination myths
- 2/3/21: Health services staff initiate education campaign to increase vaccination rates among inmates and probationers
- 2/18/21: Vaccination clinics continuing; >6,000 staff and >13,000 inmates have received 1st vaccine dose, with ~3,000 staff and inmates fully vaccinated (both doses); 1,000 COVID research updates have been briefed to clinical leadership
- 3/3/21: 44 staff and 11 inmates have COVID



Detailed Review of Timeline Events (Mid 2021)

- 3/9/21: Weekly health services duty officer rotation begins to increase response time to pandemic-related events during off-work hours
- 3/18/21: New COVID operating model with guidance on planning, logistics, data management, and communications protocols by Deloitte released
- 3/24/21: 5 staff and 27 inmates have active COVID
- 3/26/21: >4,500 staff and >13,600 inmates fully vaccinated (2 doses)
- 4/7/21: With COVID cases declining, on/off site specialty care for inmates resumes
- 4/16/21: 40 staff and 75 inmates have active COVID
- 4/19/21: Guidance issued regarding quarantine of inmates attending off-site visits to hospital emergency rooms, imaging/treatment, and multispecialty medical buildings
- 4/20/21: Vaccine information cards distributed to facility ambassadors to promote vaccine confidence and reduce hesitancy among staff and inmates
- 5/13/21: Facts released about River North Correctional Center outbreak that occurred in April, mostly in 1 pod housing majority of unvaccinated inmates
- 5/17/21: 28 staff and 2 inmates have active COVID
- 5/20/21: >5,400 staff and >16,100 inmates fully vaccinated (2 doses)



Detailed Review of Timeline Events (Mid 2021)

- 5/26/21: Guidelines for treatment of long COVID issued to medical staff
- 6/15/21: Inmates resume working in facilities and community settings based on vaccination status; face masking and other prevention strategies remain in effect
- 7/1/21: Inmate early release ends; 2,185 inmates received early release
- 7/2/21: Medical staff receive guidance on managing myocarditis and other clinical issues following COVID vaccination
- 7/6/21: 11 staff and 5 inmates have active COVID
- 7/15/21: Facilities reopening for official visitors with antigen testing and face masking required
- 7/29/21: 16 staff and 1 inmate have active COVID
- 8/12/21: VADOC partnering with VDH, DHRM, OAG to comply with Governor's antigen testing directive for unvaccinated staff; medical guidelines updated with new vaccine/testing requirements; latest medical epidemic/pandemic sanitation plan (#12) issued; Regen-cov, a monoclonal antibody, is used to treat inmates with COVID
- 8/23/21: COVID medical guidelines revised with updates on risk stratification, intake/transfer, and testing of testing of inmates



Detailed Review of Timeline Events (Mid/Late 2021)

- 8/24/21: 3rd primary vaccine dose administered to immunocompromised inmates
- 8/31/21: To promote rapid outbreak response, mass point prevalence and antigen testing conducted simultaneously
- 9/1/21: 9 facilities reopen for family visitors; in total, ~75% of all inmates have received 1 vaccine dose, with ~62% fully vaccinated (both doses)
- 9/16/21: 139 staff and 47 inmates have active COVID
- 9/20/21: Point prevalence testing ends, while wastewater, antigen, and PCR continue; VADOC vaccinating all staff and inmates who request it; medical staff administering PCR tests to inmates prior to off-site transportation
- 9/27/21: Medical staff screening inmates with active COVID to determine appropriateness for monoclonal antibody treatment
- 9/29/21: 105 staff and 106 inmates have active COVID
- 10/1/21: Antigen testing begins for all unvaccinated inmates
- 10/29/21: Oral antiviral treatment guidance issued; non-hospitalized inmates at high risk of severe COVID treated with Paxlovid or Molnupiravir antivirals



Detailed Review of Timeline Events

(Late 2021/Early 2022)

- 11/3/21: Ongoing vaccine clinics for immunocompromised inmates (3rd dose) and inmates requesting booster; 41 staff and 61 inmates have active COVID
- 11/12/21: Agency conducting statewide booster vaccination clinics for staff
- 12/10/21: 61 staff and 34 inmates have active COVID, increasing to 297 staff and 160 inmates on 12/27
- 12/30/21: Community transmission increasing; all staff, inmates, visitors required to wear surgical masks; cloth face coverings are prohibited; in-person classes, programs and religious services for inmates temporarily suspended
- 1/5/22: Off-site non-essential medical appointments for inmates restricted based on need due to increasing COVID cases
- 1/13/22: Moderna COVID booster interval shorted from 6 to 5 months
- 1/15/22: 802 staff and 2,115 inmates have active COVID (highest counts)
- 1/19/22: Evusheld, a monoclonal antibody for preventing COVID, is used to treat high-risk inmates with exposure, but testing negative for infection
- 2/2/22: Inmates (regardless of vaccination status) undergo 10 days of quarantine or isolation following exposure or confirmed infection
- 2/9/22: Due to national shortage, medical staff using antigen tests labeled for at home use to test inmates for COVID



Detailed Review of Timeline Events

(Early/Mid 2022)

- 3/1/22: Based on CDC recommendations, latest guidance (#3) on managing COVID in corrections issued with updates on medications for preventing severe COVID and vaccination status; 2,000 COVID research updates have been briefed to clinical leadership
- 3/2/22: 48 staff and 83 inmates have active COVID; quarantine no longer required for certain internal transfers; inmates transported together (regardless of vaccination status), in same vehicle as long as wearing masks
- 3/3/22: Vaccination continuing, but consideration for 8-week interval between doses in males aged 18-39 years
- 3/9/22: Due to omicron, Evusheld dosage increased for certain high-risk inmates
- 3/11/22: 38 staff and 35 inmates have active COVID; in-person classes, programs, and religious services resume for inmates
- 3/21/22: Each inmate receives 1 box of antigen tests upon release
- 3/22/22: Latest infirmary IPC checklist (#5) with updated vaccination changes released
- 3/28/22: Mandatory face masking ends in administrative offices, but continues in correctional facilities; latest COVID Q&A (#37) communication issued to staff
- 4/1/22: Masking in outdoor settings ends



Detailed Review of Timeline Events (Mid 2022)

- 4/8/22: Face masks for staff, inmates optional in facilities with no COVID cases, but required in all medical treatment areas, infirmaries, and visitation areas
- 4/13/22: Guidance on 2nd boosters 4 months after 1st boosters for immunocompromised individuals, adults aged 50 and older
- 4/15/22: 10 staff, 1 inmate have active COVID
- 4/18/22: Latest pandemic guidance (#73) issued with updates on sanitation, PPE use, and vaccination
- 4/19/22: PPE strategy updated to reflect new CDC masking guidance for staff/inmates to low to high-risk zones
- 4/20/22: Teledentistry crisis contract ends



Sussex II
Medical Staff



Red Onion Medical Staff

Summary

- Throughout the pandemic, VADOC has worked to protect the health and safety of its staff and inmates by adopting measures (e.g., PPE distribution, medical guideline updates, point prevalence and wastewater testing, vaccination, and more) mitigating much of COVID's adverse effects
- As a new stage of the pandemic begins, VADOC will continue its proactive approach to combating COVID-19



VADOC's 1st Moderna vaccine volunteer was Nurse Martin at Cold Springs



Thank You!

- Additional information is available on VADOC website at [COVID-19/Coronavirus Updates](#)
- Please let us know if you have questions or comments



Randy Yates, CO Medical Officer
Katherine Saucier, LPN
Conducting doctor call at Keen Mountain
Correctional Center



Brian Overton, RN
Buckingham Correctional
Center