

 <p style="text-align: center;"><b>DIVISION OF ADULT INSTITUTIONS</b></p> <p style="text-align: center;"><b>POLICY AND PROCEDURES</b></p>	<b>DAI Policy #:</b> 500.70.01	<b>Page</b> 1 of 6
	<b>Original Effective Date:</b> 01/22/10	<b>New Effective Date:</b> 04/01/24
	<b>Supersedes:</b> 500.70.01	<b>Dated:</b> 08/31/20
	<b>Administrator's Approval:</b> Sarah Cooper, Administrator – 3/5/24	
	<b>Required Posting or Restricted:</b>	
<input checked="" type="checkbox"/> <b>Inmate</b> <input checked="" type="checkbox"/> <b>All Staff</b> <input type="checkbox"/> <b>Restricted</b>		
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Mental Health Screening, Assessment and Referral		

**POLICY**

The Division of Adult Institutions shall ensure that PIOC are provided with clinically appropriate mental health screenings, evaluations, and referrals.

**REFERENCES**

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018, P-E-05 – Mental Health Screening and Evaluation

DAI Policy 410.30.01 - Screening for Risk of Sexual Abusiveness and Sexual Victimization

DAI Policy 500.80.03 – Medication Reconciliation – Continuation of Medication

DAI Policy 500.30.56 – Receiving Screening

Mental Health Assessment Nursing Protocol

Wis. Stat. s. 302.385- Correctional Institution Health Care

**DEFINITIONS, ACRONYMS AND FORMS**

Advanced Care Provider (ACP) – Provider with prescriptive authority

DAI – Division of Adult Institutions

DOC – Department of Corrections

DOC-2077 – Health Transfer Summary

Health Care Record (HCR)– DOC-approved electronic medical record

Intellectually Disabled (ID) – An IQ of approximately 70 or below with concurrent impairments in present adaptive functioning and age of onset before 18 years.

IQ – Intelligence Quotient

Mental Health Caseload – Inmates classified as MH-1, MH-2a, MH-2b or ID.

Mental Health (MH) Staff – PSU staff and DOC psychiatrists

MH-0 – PIOC has no current mental health need, does not need a scheduled follow-up visit with PSU and is not seeing a psychiatrist for any reason.

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MH-1 – PIOC is receiving mental health services but does not suffer from a serious mental illness. This code is not appropriate for PIOC who are receiving only program services, such as substance abuse or sex offender treatment, and have no other mental health needs.

MH-2a – PIOC has a current diagnosis of, or is in remission from, the following conditions: Schizophrenia, Delusional Disorder, Schizophreniform Disorder, Schizoaffective Disorder, Other Specified (and Unspecified) Schizophrenia Spectrum and Other Psychotic Disorder, Major Depressive Disorder, Bipolar I Disorder, and Bipolar II Disorder. MH2-a also includes inmates with current or recent symptoms of the following conditions: Brief Psychotic Disorder, Substance / Medication-Induced Psychotic Disorder, head injury or other neurological impairments that result in behavioral or emotional dyscontrol, chronic and persistent mood or anxiety disorders, and other conditions that lead to significant functional disability.

MH-2b – PIOC has a primary personality disorder that is severe, accompanied by significant functional impairment, and subject to periodic decompensation (i.e., depression or suicidality). If PIOC has stable behavior for two years, the code may be reassessed. Excluded from MH-2B classification are PIOC who have a primary diagnosis of Antisocial Personality Disorder and whose behavior is primarily the result of targeted goals rather than impairment from diagnosed mental illness.

PIOC - Persons in our Care

Psychological Services (PSU) Staff – Employees classified as Psychologist Supervisor, Psychologist – Licensed, Psychological Associate Psychological Services Assistant, Clinical Social Worker, or any other clinical classification that is directly supervised by Psychological Services.

Psychiatry Provider - Psychiatrist or Psychiatric Advanced Practice Nurse Practitioner (APNP).

RH – Restrictive Housing

Working Days – All days except Saturdays, Sundays, and legal holidays.

## **PROCEDURE**

### **I. Health Services Initial Screening by Nursing Staff**

- A. The intake health screening interview shall be conducted by nursing staff on the day of intake and documented in the HCR per DAI Policy 500.30.56.
- B. The intake health screening shall include a review of the DOC-2077 and any related documents which accompanies PIOC.
- C. The intake health screening shall include the following mental health information:
  1. Past or current mental illness, including hospitalization.

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2. History of or current suicidal ideation.

**D. Psychotropic Medication**

1. Current and verified psychotropic medication shall be continued as per DAI Policy 500.80.03.
2. PIOC taking psychotropic medication shall be scheduled with a psychiatric provider and evaluated at the next available appointment.
3. PIOC shall remain on current and verified psychotropic medication pending psychiatric provider assessment.
4. ACPs shall review and sign medication orders within one working day of intake from a facility outside DOC.

E. Nursing staff shall refer PIOC to PSU staff as described in the Mental Health Assessment Nursing Protocol.

**II. Mental Health Classification Codes**

- A. Mental health classification codes shall be assigned to all DAI PIOC at or near the time of intake.
- B. Those who meet criteria for both MH-2a and MH-2b shall be coded MH-2a.
- C. As the conditions that prompted a coding of MH-1 resolve, the code may be changed to MH-0. Such a change indicates that there is no longer a need for scheduled mental health follow-up.
- D. MH-2 codes shall be changed to lower codes in a conservative manner. However, if there is a clear indication that the qualifying diagnosis for an MH-2a PIOC was incorrect, or if an MH-2b inmate has a long period of stability without the need for ongoing treatment, these codes may be appropriately changed to lower codes.

**III. PSU Intake Screenings**

- A. PSU staff shall conduct a face-to-face intake screening within two working days of PIOC arrival and document in the health record. This screening applies to PIOC arriving from community and jail settings at both intake and non-intake facilities.
  1. A preliminary treatment plan shall be developed during the screening process for each PIOC identified as MH-1, MH-2a, MH-2b or ID. The treatment plan shall include recommendations regarding housing assignment, mental health follow-up, and referral to other disciplines or facilities.
  2. For PIOC with serious mental illness (MH-2a or MH-2b), PSU staff shall attempt to obtain written consent for release of information when there are identifiable and clinically relevant prior treatment records that may exist.
- B. PSU staff shall document referrals to a psychiatric provider or other DOC staff in HCR.

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#### **IV. PSU Transfer Screenings**

- A. PSU staff at receiving facilities with on-site PSU staff shall conduct a file review for each PIOC identified as MH-1, MH-2a, MH-2b or ID within three working days of transfer and document in the health record. PIOC shall be prioritized for face-to-face interviews according to clinical need, including apparent risk of self-harm, harm to others, or mental deterioration.
- B. PSU staff at sending facilities shall contact PSU staff or a Security Supervisor at receiving facilities if PIOC with urgent or concerning mental health needs is being transferred.
- C. PIOC who require acute mental health services beyond those available on-site shall be transferred to an appropriate facility for care.

#### **V. RH Screens**

- A. PSU staff shall conduct face-to-face interviews within one working day for PIOC who are classified as MH-2a, MH-2b or ID in the following situations:
  - 1. Initial placement in an RH setting.
  - 2. Transfer into a facility in RH status.
- B. These evaluations shall assess psychological stability and the need for psychological services and be documented in the HCR.

#### **VI. Staff Referrals**

When a staff member becomes aware of PIOC who has previously unrecognized serious mental health needs or has a significant worsening of symptoms, that staff member shall make an immediate referral to PSU staff via phone or in person. Serious mental health needs may include:

- A. Self-harm risk.
- B. Symptoms of psychosis such as delusional beliefs or hallucinations.
- C. Severe depression or anxiety.

#### **VII. PREA Referrals**

- A. As per DAI Policy 410.30.01, staff who conduct PREA risk screenings shall offer PIOC a follow-up meeting with PSU staff when the screening indicates that an inmate has experienced prior sexual victimization or has previously perpetrated sexual abuse. For PIOC who accept such referrals, staff shall make a referral to PSU as soon as possible but no later than the end of the work day. PSU staff shall meet with the PIOC within 14 calendar days of the PREA screening.
- B. PSU staff shall attempt to conduct a mental health evaluation of all known PIOC-on-PIOC abusers within 60 days of when DOC staff first learn of the abuse history.

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1. Sexual abuse of PIOC by another PIOC is defined in DAI Policy 410.30.01 and involves non-consent, coercion, or inability to consent.
2. DOC Staff will generally become aware of PIOC-on-PIOC abuse in one the following situations:
  - a. During an intake PREA Screening when the PIOC responds to questions about past abuse history.
  - b. After a current and active PREA investigation has substantiated PIOC-on-PIOC abuse.
3. In either of the above situations, DOC staff shall refer the PIOC to PSU staff within 2 business days.
  4. PSU staff shall evaluate whether the PIOC is appropriate for mental health treatment and/or sex offender treatment, and offer treatment when deemed appropriate.

## DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

<b>Facility:</b> Name		
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<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Mental Health Screening, Assessment and Referral		
<b>Will Implement</b> <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
<b>Warden's/Center Superintendent's Approval:</b>		

### REFERENCES

### DEFINITIONS, ACRONYMS AND FORMS

### FACILITY PROCEDURE

#### I.

- A.
  - 1.
    - a.
- B.
- C.

#### II.

- A.
- B.
- C.