

DEPARTMENT OF REHABILITATION
AND CORRECTION

SUBJECT: Mental Health Rounds in Special Management and Death Row Housing Units	Page 1 of 5
RULE/CODE REFERENCE:	NUMBER: 67-MNH-31
RELATED ACA STANDARDS:	SUPERSEDES: 67-MNH-31 dated 03/19/14
	EFFECTIVE DATE: January 6, 2015
	APPROVED: 

I. AUTHORITY

This policy is issued in compliance with Ohio Revised Code 5120.01 which delegates to the Director of the Department of Rehabilitation and Correction the authority to manage and direct the total operations of the Department and to establish such rules and regulations as the Director prescribes.

II. PURPOSE

This policy establishes guidelines for the regular on-site mental health rounds and services in housing units for inmates in special management status (including security control, security control investigation, disciplinary control, local control, and protective custody) and death row.

III. APPLICABILITY

This policy applies to all persons employed by or under contract with the Department of Rehabilitation and Correction and all inmates incarcerated in prisons operated by or under contract with the Department.

IV. DEFINITIONS

Death Row – (1) A housing area at the Chillicothe Correctional Institution (CCI) or Ohio State Penitentiary (OSP) that has been designated by the Director of the Department of Rehabilitation and Correction to house male prisoners who are committed to the Department with a sentence of death; (2) A housing area at the Ohio Reformatory for Women (ORW) that is similarly designated to house female prisoners committed to the Department with a sentence of death; (3) A housing area at the Franklin Medical Center (FMC) that has been designated by the Director of the Department of Rehabilitation and Correction to house male or female prisoners whose medical needs are inconsistent with assignment to CCI, ORW, or OSP pursuant to Department Policy 68-MED-13, Medical Classification; or such other facility as may be deemed appropriate by the Director. Death Row is also a reference to a housing status for prisoners sentenced to death; it is not a security classification.

Independently Licensed Mental Health Professional (ILMHP) - Psychiatrists, Psychologists, Advanced Practice Nurse - Mental Health (APN-MH), Licensed Professional Clinical Counselors

(LPCC), and Licensed Independent Social Workers (LISW), who by virtue of their training and experience, are qualified to provide mental health care and have been specifically assigned identified tasks in this policy.

Mental Health Caseload - Consists of inmates with a mental health diagnosis who receive treatment by mental health staff and are classified as C-1 (Seriously Mentally Ill, SMI), or C-2 (Mental Health Caseload but not SMI), ID/DD, or on hold (no mental health classification) at a reception center (CRC, LorCI, ORW) or during the assessment phase of a comprehensive evaluation that will result in a diagnostic formulation.

Mental Health Professionals (MHP) - Those persons who, by virtue of their training and experience, are qualified to provide mental health care within the provisions of the state's licensure laws, policies and guidelines including Psychology Assistants, Licensed Professional Counselors (LPC), Licensed Social Workers (LSW), Registered Nurses (RN), and Activity Therapists (AT).

Special Management Housing Unit – A housing unit inclusive of, but not necessarily limited to, security control, security control investigation, disciplinary control or protective control, which imposes housing and privilege limitations upon an inmate independent of his or her security classification status. The procedures set forth in this policy applies even when the placement is in a non-traditional unit i.e. security control or disciplinary control that is served on a residential treatment unit (RTU).

Seriously Mentally Ill (SMI) - Those inmates with a serious mental illness are persons who are age 18 and over, who currently or at any time during the past year, have a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the most current Diagnostic and Statistical Manual of Mental Disorders and that has resulted in functional impairment which substantially interferes with or limits one or more major life activities. These disorders have episodic, recurrent, or persistent features; however, they vary in terms of severity and disabling effects.

V. POLICY

It is the policy of the Department that mental health staff conduct regular mental health rounds and provide appropriate interventions for all inmates confined in special management housing units and death row to ensure that inmates previously identified as being seriously mentally ill continue to receive mental health services while confined in said housing statuses and to ensure that any inmates exhibiting signs of serious mental illness or in acute distress in confinement are detected and treated in a timely manner.

VI. PROCEDURES

A. Mental Health Rounds and Screening in Special Management Housing Units

1. The primary purpose of mental health rounds in special management housing units is to determine if an inmate is in need of mental health interventions or services. An MHP or ILMHP shall complete on-site rounds in the institution's special management housing units at least one time each week.
2. There cannot be more than seven (7) days between mental health rounds to the unit.

3. Mental health staff conducting rounds shall sign the unit logbook and note the reason for the visit as “MH ROUNDS.”
4. Mental health rounds shall be conducted between 8am and 8pm to increase inmate availability and interaction.
5. Mental health rounds in special management housing units shall consist of:
 - a. Verbal contact with every inmate in the unit confined in a Special Management Housing Unit;
 - b. Consultation with the correctional officers to determine if any possible mental health issues and/or problematic inmate behaviors have been observed by security staff in the unit;
 - c. Review of the Individual Segregation Records (DRC4118), with the exception of those inmates housed in protective control.
6. Documentation of the mental health rounds shall be made as an entry into the Mental Health Services Rounds Log – Special Management Housing Unit & Death Row (DRC5171).
7. Those inmates that are identified as needing a higher level of mental health services shall receive such services as clinically indicated. Mental health referrals shall be made pursuant to institutional processes as identified by the Mental Health Administrator/Manager and consistent with Mental Health Services Rounds Log SMHU & DR (DRC5171).

B. 30 Day Special Management Housing Unit Review (excluding PC)

1. An MHP or ILMHP shall personally interview any inmate remaining in a Special Management Housing Unit for more than thirty days and prepare a 30 Day Review Report (DRC5205).
2. If confinement in segregation continues beyond 30 days, the MHP or ILMHP shall complete the 30 Day Review Report (DRC5205) every 30 calendar days thereafter or more frequently if prescribed by the Chief Psychiatrist.
3. Seriously Mentally Ill Inmates that are in a special management housing unit greater than 30 days shall have a new multi-disciplinary treatment plan developed identifying new interventions related to the extended placement. These interventions shall include increased out of cell mental health programming and structured activities as behavior allows. Discontinuation of interventions during this specific treatment planning process must be clinically indicated and cannot be based solely upon the inmate’s placement in a special management housing unit.

C. Mental Health Rounds and Screening in Death Row

1. The primary purpose of mental health rounds in death row is to determine if an inmate is in need of mental health interventions or services. An MHP or ILMHP shall complete on-site rounds in the institution’s death row unit(s) at least one time each week.

2. There cannot be more than seven (7) days between mental health rounds to the unit.
3. Mental health staff conducting rounds shall sign the unit logbook and note the reason for the visit as “MH ROUNDS.”
4. Mental health rounds shall be conducted at times that are conducive to inmates being available i.e. traditional awake times, preferably 1st and 2nd shift, etc.
5. Mental health rounds in death row shall consist of:
 - a. Verbal contact with every inmate in the unit confined in death row;
 - b. Consultation with the correctional officers to determine if any possible mental health issues and/or problematic inmate behaviors have been observed by security staff in the unit;
6. Documentation of the mental health rounds shall be made as an entry on the Mental Health Services Rounds Log – Special Management Housing Unit & Death Row (DRC5171).

D. Inmates that Appear to be in Distress, Demonstrating Serious Mental Health Symptoms or Suicidal

1. All staff shall be cognizant of suicidal risk factors utilized by the BOBHS.
2. If the inmate is in immediate crisis and/or suicidal, the mental health staff shall initiate a constant watch utilizing the Authorization for Crisis Precautions (DRC5200). The mental health staff shall maintain constant supervision of that inmate until the time the watch correctional officer is in place to continue the observation.
3. The mental health staff completing rounds shall be permitted to have the inmate released from his/her cell and placed in an interview room in order to conduct a confidential assessment, dialogue or session with the inmate if needed; however, this should not be the normal process during mental health segregation rounds.

E. Treatment and Intervention

Inmates housed in a special management status or death row shall have continued access to all mental health treatment prescribed by the treatment plan, and as behavior permits. This shall include individual therapy conducted in confidential manner, materials and interaction with a group facilitator if involved in group therapy, MHL contact as indicated on his/her treatment plan and ongoing medication management per policy, as behavior permits.

Related Department Forms:

Individual Segregation Record Sheet

DRC4118

Mental Health Services Rounds Log SMHU & DR

DRC5171

Authorization for Crisis Precautions

DRC5200

30 Day Segregation Review Report

DRC5205

Referral to Mental Health

DRC5265