

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department of Public Safety
Prisons

SECTION: Continuity of Patient Care

POLICY # CC-6

PAGE 1 of 3

SUBJECT: Behavioral Health Services - Case Finding and
Patient Flow

EFFECTIVE DATE: May 2018

SUPERCEDES DATE: October 2008

References

Related ACA Standard

Edition Standards for Adult Correctional
Institutions 4-4368, 4-4369, 4-4370, 4-4372, 4-4399

POLICY

To address offender mental health needs at various stages from sentencing through the period of incarceration by identification, assessment, and specialized service delivery options, to ensure offenders receive appropriate mental health services.

PROCEDURE

Access to Care

Offenders who are in need of behavioral health interventions are identified either at prison intake or during the period of incarceration.

1. Offenders identified during intake are referred to behavioral health staff at the Diagnostic/Reception Centers when:
 - a. they have been referred by the committing court;
 - b. their responses to the Mental Health Screening Inventory indicate a need for further psychological assessment;
 - c. behavioral abnormalities are observed by staff;
 - d. they are on psychotropic medication upon arrival to prison; or
 - e. the offender self refers.
2. During the period of incarceration, offenders are referred to psychologists or other behavioral health staff when they are:
 - a. referred by medical personnel;
 - b. referred by non-medical staff due to observed behavioral abnormalities, or
 - c. self-referred.

Specialized Service Delivery Options

Referrals. Generally, behavioral health services are provided on an outpatient basis by behavioral health staff assigned to units where the offender is housed. When the severity of mental disorder is such that treatment resources at the local site are insufficient, the offender is referred to a specialized service delivery center. If behavioral health staff determines the offender cannot be treated effectively with available resources on an outpatient basis, the offender will be referred for transfer to a higher level of care in an inpatient or residential behavioral health unit. Inpatient and residential referrals will be made in compliance with the procedures described in section CC-7 of the Healthcare Policy Manual.

When there is a question as to the appropriateness of an offender's referral to a higher level of care in an inpatient or residential behavioral health unit, the Psychological Program Manager or designee shall review the referral. If the issue cannot be resolved at the Psychological Program Manager level, the Psychological Program Manager or designee may

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submit the case to the Behavioral Health Assistant Director for the region in which the referral originated for resolution, including a final determination of the treatment needs of the offender.

Upon completion of inpatient or residential treatment, the offender will be returned to an appropriate prison unit in accordance with the discharge procedures of the treating facility and referred back to the outpatient clinic for follow-up care. Offenders may be transferred between specialized inpatient and residential treatment facilities as needed to facilitate delivery of the most appropriate treatment.

Restrictive Housing. Long-term assignment in single cell restrictive housing units may produce stress sufficient to induce deterioration in mental functioning in certain offenders. An initial assignment to restrictive housing, or repeated assignment to restrictive housing may indicate that the offender has behavioral problems related to the existence of a mental disorder. For these reasons, offenders in restrictive housing may benefit from an increase in monitoring by the behavioral health staff assigned to restrictive housing units in accordance with policy A-5 Offenders in Restrictive Housing.

Responsibilities

It is the responsibility of the Psychological Program Manager or designee for each service delivery area to monitor case findings in their areas and institutions to ensure identification of offenders with mental disorders is completed and appropriate assessment services and treatment are provided.

Court Referrals

In some cases, the sentencing court recommends that an offender receives a mental health evaluation or mental health treatment in the commitment order. In such cases, the offender must be evaluated by an appropriately privileged clinician to determine the need for treatment and, if treatment is required, the extent of the appropriate treatment. Clinicians will complete consultations and make referrals as indicated. Clinicians will prepare a letter for the sentencing court, using the sample letter below, to report the action taken on the court's recommendation.



Terri Catlett, Deputy Director Health Services

7/3/18
Date



Kenneth E. Lassiter, Director of Prisons

7/3/18
Date

SOR: Director of Behavioral Health Services

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SAMPLE LETTER TO COMMITTING COURT

North Carolina Department of Correction
Division of Prisons
831 West Morgan Street • 4260 MSC • Raleigh, North Carolina 27699-4260
Telephone (919) 838-4000 Fax (919) 715-9534

Roy Cooper, Governor
Erik A Hooks, Secretary

Ruben F. Young, Interim Chief Deputy Secretary
Kenneth E. Lassister, Director of Prisons

Date _____

The Honorable _____

Dear Judge _____:

In response to your request for (psychiatric) (psychological) evaluation and/or treatment for (offender's name) on Commitment Order # _____, the following actions were taken:

_____ (a brief description of the mental health intervention accomplished)

Your interest in the treatment of this individual is appreciated. If you would like any additional information related to this case, please do not hesitate to contact us.

Sincerely,

John Doe
Staff Psychologist II