FLORIDA DEPARTMENT OF CORRECTIONS OFFICE OF HEALTH SERVICES

HEALTH SERVICES BULLETIN NO. 15.05.13

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SUBJECT: MENTAL HEALTH STAFF ON DISCIPLINARY TEAMS

EFFECTIVE DATE: 02/02/16

PURPOSE:

To provide guidelines regarding mental health services consultation in disciplinary hearing procedures.

These standards and responsibilities apply to both Department staff and Comprehensive Health Care Contractor (CHCC) staff.

I. POLICY:

- A. Discipline of Mentally Disordered shall be effected in accordance with Rule 33-404.108, *Discipline and Confinement of Mentally Disordered Inmates*. Mental health staff is authorized to provide input to the disciplinary team before disciplinary action is taken against any inmate who has a diagnosed mental illness, mental retardation, or who is otherwise cognitively impaired (see also Rule 33-601.307). The input shall be limited to whether the patient's mental illness, mental retardation, or cognitive impairment may have contributed to the alleged disciplinary offense and, if so, a recommendation for disposition or sanction options or alternative actions.
- B. Written input by either a psychologist or psychiatrist is required for inmates who are patients in isolation management, transitional care, crisis stabilization, or in a corrections mental health treatment facility. For inmates classified as S-2 or S-3, it is the option of the Disciplinary Review Team to request input from either the psychologist or psychiatrist.

C. The following sections pertain to inpatient mental health units:

- D. Prior to writing a disciplinary report (DR) for incidents of maladaptive behavior, the Officer in Charge (OIC) shall informally discuss the incident and circumstances with the inpatient unit's supervising psychologist or the psychological services director to determine the most appropriate course of action. The options for the most appropriate course of action range from time-limited restriction of property involved in the infraction to issuing a DR.
- E. When a DR is written, the inmate will be placed on Level 3 of the Mental Health Unit Behavioral Level System. Any property restrictions resulting from inappropriate usage (for example, placing a mattress against the cell door, covering the window with linen or personal clothing, using personal property as an instrument of harm to self or others) will require an order from the Psychiatrist or Psychologist during regular duty hours and documentation of the action as an incidental note in the inpatient health record. After

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regular work hours, the OIC will order removal of the property that is being used inappropriately and document the action on DC6-229.

- F. If a DR is upheld, thereby resulting in a disciplinary action, the inmate shall be placed on Level 2 of the Mental Health Unit Behavioral Level System.
- G. The mental health Multi-Disciplinary Services Team (MDST; see HSB 15.05.11) will review all property restrictions daily during regular duty hours for clinical justification, and the rationale for continuation or discontinuation shall be documented by the Psychiatrist of Psychologist as an incidental note in the medical record. On weekends and holidays, the OIC will review all property restrictions daily with corresponding documentation on the DC6-229.
- H. Within two regular business days after any inmate has been disciplined, the case manager shall meet with the inmate concerning the specific maladaptive behavior prompting the disciplinary action and shall incorporate the behavior into the individualized service plan, if it has not already been addressed in this manner.
- I. Within three regular business days of the disciplinary action, the MDST shall meet with the inmate to specify the effects of the inmate's maladaptive behavior on his or her access to property and activities under the Mental Health Unit Behavioral Level System. In this meeting, the MDST shall counsel the inmate on more adaptive behavior and , communicate that in the event the inmate demonstrates substantial and sustained improvement in behavior, as stipulated by the MDST, the MDST will reconvene and recommend, for the institutional Warden's consideration, a reduction of the restrictions imposed, except in cases of disciplinary action resulting from assault or sexual violations. The MDST must be clear that, regardless of its recommendation, any mitigation of disciplinary action is at the discretion of the Warden.
- J. When disciplinary actions against an inmate are for longer than thirty days, the MDST shall meet at least each 30 days with the inmate to review the inmate's behavior for the intervening period. Except in disciplinary actions resulting from assault or sexual violations, the MDST will notify the inmate as to whether it will recommend a reduction in the terms of the disciplinary action for the institutional Warden's consideration. The MDST must be clear that, regardless of its recommendation, any mitigation of disciplinary action is at the discretion of the Warden.
- K. Inmates who engage in any sexual act in the presence of staff or visitors will receive appropriate mental health intervention. The identified behavior will be identified in the ISP with the goal to assist the patient in gaining control of the maladaptive behavior and facilitate satisfactory adaptive functioning. Disciplinary Reports will be written for all occurrences of the conduct described in Rule 33-601.314, *Rules of Prohibited Conduct and Penalties for Infractions* (§ 1-6, Lewd or Lascivious Exhibition) and inmates in an inpatient unit shall be subject to the provisions of Rules 33-601.301 through 33-601.314

This Health Service Bulletin Supersedes:

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in accordance with Rule 33-404.108, <i>Discipli Inmates</i> .	ine and Confinement of Mentally Disordered
L. In the event a DR is overturned, based on maintaining the integrity of the therapeutic er MDST may retain the inmate on Level 3 or m	nvironment as well as specific ISP goals, the
Assistant Secretary for Health Services	Date

HSB 15.15.05.13 dated 10/10/96, 3/17/97 and 08/27/13.