

FLORIDA DEPARTMENT OF CORRECTIONS
OFFICE OF HEALTH SERVICES

HEALTH SERVICES BULLETIN 15.05.14

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SUBJECT: MENTAL HEALTH SERVICES

EFFECTIVE DATE: 02/02/16

I. PURPOSE

The purpose of this health services bulletin (HSB) is to provide a general overview regarding the organization, service availability/client identification, records/research, and ethics/legal aspects of the Department's mental health services.

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

II. ORGANIZATION

- A. The organization of mental health services and staff shall be approved by the Assistant Secretary of Health Services and shall be available in written form to staff upon request.
- B. The mission of mental health services and the work of mental health personnel are governed by written goals and objectives that are approved by the Assistant Secretary of Health Services. Mental health staff job descriptions conform to applicable professional guidelines and are approved by the Mental Health Services Director.
- C. Mental health services are bound by comprehensive policy, detailed in Chapter 33-404, *Florida Administrative Code (F.A.C.)*.
- D. Operational instructions and requirements for the delivery of mental health services are provided in Department Procedures (principally the 404.000 series) and Health Services Bulletins (15.05.xx series).
- E. Adequate space, equipment, supplies, resources, and materials shall be provided for the delivery of mental health services.
- F. The types and numbers of mental health staff shall be sufficient to accomplish the mission, goals, and objectives of mental health services. Mental health staff shall meet minimum qualifications established by the State of Florida.
- G. A system of credentialing, privileging, and clinical supervision is implemented to help ensure that staff members perform only those tasks for which they have appropriate training and experience; reference HSB 15.09.05, *Credentialing and Peer Review Program*.

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- H. New employees shall be given proper orientation and on-the-job training. Relevant in-service training and continuing education appropriate to Florida licensure requirements may also be provided and/or supported.
- I. The quality of mental health care shall be ensured through a system-wide clinical quality management program as set forth in HSB 15.09.01, *Quality Management Program*.

III. SERVICE AVAILABILITY/CLIENT IDENTIFICATION

- A. All inmates, including those housed in confinement areas, shall have appropriate access to necessary mental health care.
- B. A comprehensive and systematic course of action for identifying inmates who are suffering from mental disorder shall be maintained. This includes timely screening and evaluation at reception, per HSB 15.05.17, *Intake Mental Health Screening at Reception Centers*, and thereafter as the need arises.
- C. Inmates who require mental health services that are not available in the facility of residence shall be transferred to a facility in which proper care can be provided; reference Procedure 404.003, *Mental Health Transfers*.
- D. The scope and levels of care shall be consistent with the needs of the mentally disordered inmate population. Outpatient mental health care is governed by HSB 15.05.18, *Outpatient Mental Health Services*, inpatient mental health care is provided according to HSB 15.05.05, *Inpatient Mental Health Services* and infirmary mental health services are delivered in accordance with Procedure 404.001, *Suicide and Self-Injury Prevention* and HSB 15.03.26, *Infirmary Services*.
- E. Continuity of service delivery shall be maintained when inmates are transferred from one setting to another, in accordance with HSB 15.05.11, *Planning and Implementation of Individualized Mental Health Services*.
- F. Inmates shall be advised about mental health services and how to access those services, both verbally and in writing, in accordance with Procedure 403.008, *Inmate Health Services Orientation and Education*.

IV. SERVICE DELIVERY

- A. As determined by mental health staff, inmates who display symptoms of mental disorder (as defined in the current *Diagnostic and Statistical Manual of Mental*

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Disorders) which interfere with their adjustment to incarceration shall be eligible to receive ongoing mental health treatment. Note that substance abuse disorders are addressed through the Department's Bureau of Substance Abuse and will not be the primary focus of services provided by mental health staff, although provisions are in place allowing mental health and substance abuse staff to coordinate services; for example, see HSB 15.05.18.

- B. Priority for service delivery shall be given to inmates who are demonstrating more acute symptoms of mental disorder.
- C. Mental health service delivery shall be timely, appropriate, and consistent with the inmate's needs.
- D. Ongoing mental health service delivery shall be provided through an individualized service plan in accordance with HSB 15.05.11.
- E. Post-release planning shall be provided for mentally disordered inmates who are expected to need mental health services upon release, in accordance with HSB 15.05.21, *Mental Health Re-Entry Aftercare Planning Services*.

V. SERVICE DELIVERY LOGS

The following logs shall be maintained at reception centers and all major institutions:

- A. DC4-781A, *Mental Health Emergency, Self-Harm, SHOS/MHOS Placement Log*
- B. DC4-781H, *Inmate Request/Staff Referral Log*
- C. DC4-781J, *Psychiatric Restraint Log*
- D. DC4-781K, *Seclusion Log* (inpatient mental health units only)

VI. RECORDS

- A. Mental health records shall be maintained in a consistent and uniform manner as part of the overall health record. Mental health information shall be recorded in the record in accordance with written guidelines detailed in HSB 15.12.03, *Health Records*.
- B. Confidentiality of mental health records and psychological testing protocols and data is ensured in accordance with Federal and Florida Law, and professional guidelines. Therefore, it is essential that health care providers safeguard health records from wrongful disclosure, alteration, falsification, unlawful access, or destruction in accordance with Procedure 102.006, *HIPAA Privacy Policy*.

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- C. Treatment and/or discharge summaries shall be prepared in a timely manner when treatment is discontinued.

VII. ETHICAL/LEGAL

- A. Except in emergency situations, the inmate's informed consent shall be obtained prior to delivery of mental health services (including evaluation and treatment; via form DC4-663, *Consent to Mental Health Evaluation*). The limits of confidentiality shall be explained at the time informed consent is obtained, and should be reviewed with the inmate periodically over the course of treatment.
- B. Involuntary care shall be provided in accordance with Florida law and professional standards, with due consideration given to the least restrictive alternative principle and due process; reference Chapter 33-404, *F.A.C.*, and 945.40 - 945.49, *Florida Statutes*.
- C. Mental health staff shall protect the privacy of inmates by sharing an inmate's disclosures with other department staff only when staff has a need to know such information in order to perform their official duties. For example, disclosures may be made when there is a potential breach of security or when the inmate presents a clear danger to him/herself or others.
- D. The least restrictive alternative shall be used in managing and treating mentally disordered inmates.
- E. The use of isolation, physical, or chemical restraints shall follow clinical justification by a qualified clinician, in strict compliance with HSB 15.05.10, *Psychiatric Restraint*. These devices shall not be used as punishment.

Assistant Secretary of Health Services.

Date

This Health Services Bulletin Supersedes:

HCS 25.05.01 dated 10/1/89
TI 15.05.14 dated 8/26/02 and 4/7/03.
HSB 15.05.14 dated 01/15/13
