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Justice Center for the Protection of People with Special Needs

Forensic Unit Quarterly Report

4th Quarter 2017

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Justice Center for the Protection of People with Special Needs (the Justice Center) is required to oversee compliance with the Special Housing Unit (SHU) Exclusion Law (Chapter 1 of the Laws of 2008) and to monitor the quality of corrections-based mental health care provided to inmate/patients by the Office of Mental Health (OMH) programs operated within the Department of Corrections and Community Supervision (DOCCS).

Background

The SHU exclusion law requires compliance with specific timeframes for providing screenings for risk of suicide for any inmate entering the SHU. In addition, the law requires assessments by mental health staff within statutorily designated timeframes. The timeframes are determined by the type of facility where the SHU is located, with shorter timeframes required for the facilities housing those inmate/patients who require a higher level of mental health care. In addition to determining compliance with the statutorily required timeframes described above, the law requires an evaluation of the quality of care provided to inmate/patients.

What happens on a Justice Center site visit?

Justice Center staff are provided with the census of the SHU upon arrival. Size of the units varies greatly with some units having under 20 individuals in the census and others with more than 1,000. Whatever the census, Justice Center staff tour the unit and speak cell-side with every inmate. Once the cell-side tour is complete, Justice Center staff meet and create a list of inmates to privately interview based on observations and comments made cell-side. Justice Center staff also makes referrals to OMH if any inmate appears in need of an assessment by mental health staff. These referrals can be made at the request of the inmate, or upon Justice Center staff's conclusion that such a referral is needed. These referrals, with the details of each inmate's specific need are provided to the mental health unit chief at the time of the visit and followed up in a formal letter to OMH.

Along with cell-side and private interviews, Justice Center staff designates records for inspection. To determine compliance with the timeframes listed in the SHU Exclusion Law, Justice Center staff reviews records on site.[1] In addition to reviewing records for compliance with the statutorily designated timeframes, Justice Center staff compiles a list of records to be produced to review the quality of mental health care (QMHC).[2] Once the records are produced, Justice Center staff requests copies of the clinical documentation, DOCCS guidance records, and DOCCS Sign-In and Unit Activity Log Books to review and ensure that timely and appropriate quality mental health care has been provided in accordance with OMH Policies and Procedures and DOCCS Directives. Following a thorough review, the Justice Center provides detailed findings and recommendations to OMH and DOCCS. Both agencies are provided an opportunity to respond within 30 days.

1 Justice Center staff chose a random sample of records to review for compliance with the required timeframes as follows: units with a census 50 or less, all records are reviewed; units with a census of between 51 and 100, 50% of records are reviewed; units with a census of more than 100, 20% of records are reviewed not to exceed 100 records.
2 Justice Center staff chose a sample of records to review for the quality of mental health care provided as follows: units with a census of 199 or less, 20 records are reviewed; units with a census of 200 or more, 40 records are reviewed.

Quarterly Report: Fourth Quarter of 2017 (October – December) - The Justice Center Forensic Unit initiated four Compliance/Quality of Mental Health Care Reviews in the fourth quarter of 2017; completing 407 cell-side interviews, 26 private interviews, 161 compliance reviews, and 81 reviews of the quality of mental health care provided (QMHC). Throughout this review period, the Justice Center experienced challenges obtaining records from OMH. The Justice Center and OMH continued to work collaboratively to resolve records access issues during the fourth quarter of 2017.[1]

Quarterly Summary: Fourth Quarter of 2017 ***Correctional Facility Date of Visit***	***Inmates interviewed cell-side by Justice Center***	***Private Interviews Accepted***	***Inmates referred for immediate action***	***SHU Compliance Reviews Completed***	***Quality of Mental Health Reviews Completed***
Mohawk 10/11/2017	47	8	12-Clinician	44	20
Sullivan 10/13/2017	10	3	0	10	12
Southport 11/13-15/2017	341	14	37-Clinician	98	40
Taconic 12/14/2017	9	1	0	9	9
Totals	**407**	**26**	**49-Clinician**	**161**	**81**

Inmates Interviewed by the Justice Center: Every inmate and/or patient in the SHU is interviewed cell-side by Justice Center staff. Numbers of cell-side interviews reflect the census of inmates and/or patients in the SHU at the time of the Justice Center's visit.

Private Interviews Accepted: During cell-side interviews, inmates and/or patients are offered an opportunity to meet privately with Justice Center staff. Those that agree are interviewed privately.

Inmates Referred to OMH For Immediate Action: Based on requests from inmates and/or patients, or observations by Justice Center staff, names of inmates and/or patients and of the immediate concern are provided to the OMH Unit Chief for referrals. Issues related to medication are referred for review by a psychiatrist. Others are referred to OMH for review by a clinician.

SHU Compliance Reviews: Number of inmate and/or patient records reviewed for compliance with timeframes contained in the SHU exclusion law.

[1] Effective May 10, 2018, OMH will resume providing the Justice Center with all documentation pertaining to Justice Center referrals, findings, and recommendations.

Quality Reviews Completed: Number of inmate and/or patient records reviewed for quality of mental health care provided. Specifically, Justice Center reviews whether care is in accordance with OMH Policies and Procedures and DOCCS Directives.

Mohawk

Visit Overview: conducted 10/11/2017; 47 cell-side interviews conducted with 8 private interviews accepted; 12 inmates and/or patients referred to a clinician; 44 records reviewed for compliance with the timeframes required in the SHU exclusion law.

Compliance Findings: Facility determined to not be in compliance with the timeframes required by the SHU exclusion law because a 14-day Special Housing Unit (SHU)/Long Term Keeplock (LTKL) Mental Health Interview was completed 4 days late.

QMHC: 20 records reviewed for quality of mental health care with findings of concern identified.

QMHC Findings/Recommendations and OMH/DOCCS Response:

It was determined that two inmate/patients were not seen by psychiatric staff per policy. It was recommended that OMH retrain their staff to ensure time frames are adhered to. The Justice Center also requested that the Unit Chief develop a system for regular quality assurance checks to occur at the unit level. To better monitor compliance, the OMH Unit Chief and Forensic Program Administrator developed a system for regular quality assurance checks and stated the instances of non-compliance were due to unforeseen changes in psychiatric coverage. Additionally, OMH specified that a refresher training of CNYPC CBO Policy #9.27 – Psychiatric Progress Notes was completed with all appropriate staff on January 9, 2018.

Two inmate/patients were not seen by mental health staff per policy following a facility transfer. OMH specified that training in both CNYPC CBO Policy #7.2 – Active Transfers and CNYPC CBO Policy #9.30 – Progress Notes was completed by OMH with all staff and that the Unit Chief and Forensic Program Administrator developed a system for regular quality assurance checks.

The Justice Center found that an inmate/patient had been terminated from the OMH caseload and had concerns that the presenting problems that led to his admission had not been addressed prior to his discharge. It was requested that the OMH Clinical Director review the termination and that the Justice Center be supplied with the documentation demonstrating that a review was completed. OMH responded that the Clinical Director, Director of Risk Management, and Forensic Program Administrator spoke with the treatment team and completed a thorough review of the inmate/patient's clinical case record. As a result of the review, the inmate/patient's need for mental health services will be re-evaluated and the case was reviewed with the clinical staff responsible for the previous documentation with an emphasis placed on improving the quality of documentation.

It was determined that one inmate/patient's Primary Therapist callouts were not rescheduled according to policy after the inmate/patient could not attend due to DOCCS movement. OMH indicated that all staff were trained in CNYPC CBO Policy #2.4 – Canceled/Refused/Missed Callouts to ensure that contact is maintained with all

inmate/patients. The DOCCS Executive Team also reviewed their current policy and practices in reference to mental health escorts. DOCCS reiterated that OMH staff provides a callout list to the Sergeant, who makes all necessary arrangements and there is a specific time-period for OMH to conduct callouts in the SHU.

Sullivan

Visit Overview: conducted on 10/13/2017; 10 cell-side interviews conducted with 3 private interviews accepted; 10 records were reviewed for compliance with the timeframes required in the SHU exclusion law.

Compliance Findings: Facility determined to be in compliance with the timeframes required by the SHU exclusion law.

QMHC Findings: 12 records reviewed for quality of mental health care provided with findings of concern identified:

QMHC Findings/Recommendations and OMH/DOCCS Response:

According to records reviewed, an inmate/patient was not provided one monthly session with his primary therapist. The Justice Center requested that OMH staff be provided additional training in CNYPC CBO Policy #9.30 – Progress Notes and that the Unit Chief complete quality assurance checks to ensure that mental health appointments are scheduled according to policy. OMH conducted a thorough review of the Justice Center's findings and clinical records and completed the retraining in CNYPC CBO Policy #9.30 – Progress Notes with an emphasis on the importance of timeframe documentation accuracy.

One inmate/patient was not seen by psychiatric staff per policy. It was recommended that OMH retrain their staff to ensure time frames are adhered to. OMH acknowledged the need to retrain OMH staff in CNYPC CBO Policy #9.27 – Psychiatric Progress Notes and CNYPC CBO Policy #2.4 – Canceled/Refused/Missed Callouts. The training was completed on January 16, 2018.

One inmate/patient's DOCCS Suicide Prevention Screening Guidelines form incorrectly identified the type of mental health referral warranted. DOCCS acknowledged the finding and the Deputy Superintendent for Security reminded all supervisors during their security supervisory meeting on properly filling out the form and following the instructions. In addition, the Deputy Superintendent for Security and Assistant Deputy Superintendent for Mental Health will do regular checks on the Suicide Prevention Screening Guidelines form.

Southport

Visit Overview: conducted 11/13-15/2017; 341 cell-side interviews conducted with 14 private interviews accepted; 37 inmates and/or patients referred to a clinician; 98 records reviewed for compliance with the timeframes required in the SHU exclusion law.

Compliance Findings: Facility determined to not be in compliance with the timeframes required by the SHU exclusion law because the DOCCS Suicide Prevention Screening Guidelines form was not completed on seven occasions upon admission into the SHU.

QMHC Findings: 40 records reviewed for quality of mental health care provided with findings of concern identified.

QMHC Findings/Recommendations and OMH/DOCCS Response:

Records reviewed indicated two inmate/patients were not provided monthly sessions with their primary therapist. The Justice Center requested that OMH staff be provided additional training in CNYPC CBO Policy #9.30 – Progress Notes. OMH completed a thorough review of the Justice Center's findings and clinical records, and because there were two instances in which errors took place at the Attica CF, the OMH staff at the Attica CF were retrained in CNYPC CBO Policy #9.30 – Progress Notes on February 15, 2018.

There were three different occasions in which inmate/patients' Mental Health Service Levels (MHSL) needed to be clarified to ensure appropriate continuity of care. OMH determined that the Justice Center's findings for the first case were inaccurate as the documentation had been recorded in the proper areas they were just not in the clinical case record at the time of the Justice Center's review. In addition, on the second occasion, there was a typographical error on a progress note erroneously indicating that his MHSL had changed although it had not, and lastly, that in the third situation the documentation had been recorded in the proper areas they were just not in the clinical case record at the time of the Justice Center's review. OMH indicated that all three cases had been reviewed by the Unit Chief and determined to be the appropriate MHSLs. In addition, documentation would be available for the Justice Center's review at the Office of Mental Health Forensic Services in Albany upon request.

The Justice Center determined that one inmate/patient's mental health diagnosis should be clarified and requested that the OMH Unit Chief and facility Psychiatrist review the inmate/patient's diagnosis. OMH acknowledged that the inmate/patient's diagnosis was updated and documentation would be available for the Justice Center's review at the Office of Mental Health Forensic Services in Albany upon request.

The Justice Center's record review determined that an inmate/patient's Special Housing Unit (SHU)/Long Term Keeplock (LTKL) Mental Health Interview was not completed according to the designated timeframe when he was housed in the Elmira CF SHU. OMH indicated that the inmate/patient did in fact receive his interview in the appropriate timeframe, although it was misfiled at the time of the Justice Center's site visit and is now in the clinical case record.

Taconic

Visit Overview: conducted 12/14/2017; 9 cell-side interviews conducted with 1 private interviews accepted; 9 records reviewed for compliance with the timeframes required in the SHU exclusion law.

Compliance Findings: Facility determined to be in compliance with the timeframes required by the SHU exclusion law.

QMHC Findings: 9 records reviewed for quality of mental health care provided with findings of concern identified.

QMHC Findings/Recommendations and OMH/DOCCS Response:

The Justice Center found no issues or concerns related to the quality of mental health care provided to the inmates and/or patients.