



**Justice Center for the
Protection of People
with Special Needs**

Forensic Unit Quarterly Report

3rd Quarter 2017

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The 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 patient/inmates 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: Third Quarter of 2017 (July – September) - The Justice Center Forensic Unit initiated six Compliance/Quality of Mental Health Care Reviews in the third quarter of 2017; completing 308 cell-side interviews, 35 private interviews, 116 compliance reviews, and 109 reviews of the quality of mental health care provided (QMHC). Throughout this reporting period, the Justice Center experienced challenges obtaining records from the Office of Mental Health. The Justice Center and OMH are working collaboratively to resolve these records access issues.

Quarterly Summary: Third Quarter of 2017 Correctional Facility Date of Visit	<i>Inmates interviewed cell-side by Justice Center</i>	<i>Private Interviews Accepted</i>	<i>Inmates referred for immediate action</i>	<i>SHU Compliance Reviews Completed</i>	<i>Quality of Mental Health Reviews Completed</i>
Marcy 7/18/2017	32	6	11-Clinician	20	20
Downstate 7/19/2017	32	5	3-Clinician	20	20
Woodbourne 7/25/2017	9	2	0	9	9
Collins 8/1/2017	114	9	34-Clinician	26	20
Eastern 9/8/2017	26	3	7-Clinician	20	20
Marcy RMHU 9/11/2017	95	10	12-Clinician	21	20
Totals	308	35	67-Clinician	116	109

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

Private Interviews Accepted: During cell-side interviews, inmates 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, or observations by Justice Center staff, names of inmates 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.

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.

Marcy

Visit Overview: conducted 7/18/2017; 32 cell-side interviews conducted with 6 private interviews accepted; 11 inmates and/or patients referred to a clinician; 20 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 Special Housing Unit (SHU)/Long Term Keeplock Mental Health Interview form was not completed within one business day.

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

QMHC Findings/Recommendations and OMH/DOCCS Response:

The Justice Center commended OMH for exceeding the amount of SHU rounds specified in OMH Policy.

It was determined that an inmate/patient was not provided monthly sessions with his primary therapist while housed at the Washington Correctional Facility (CF). It was recommended that OMH retrain their staff to ensure time frames are adhered to. OMH acknowledged that the Justice Center had recorded this finding in a prior review at the Washington CF and the issue had been addressed through staff training and supervision.

An inmate's Special Housing Unit (SHU)/Long Term Keeplock Mental Health Interview form was not completed in the designated time frame when he was previously housed at the Mid-State CF. OMH indicated that they completed a review of the inmate's record and that the form had been located. In addition, CNYPC CBO Policy #6.1 - Special Housing Unit Services was reviewed with all clinical staff at the Marcy CF with specific attention given to times frames for SHU Mental Health Interviews.

Downstate

Visit Overview: conducted on 7/19/2017; 32 cell-side interviews conducted with 5 private interviews accepted; 3 inmate/patients referred to a clinician; 20 records were 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 two Suicide Prevention Screening Guidelines Forms were not completed in the appropriate time frame. The Downstate Superintendent re-issued a memo that the form should be completed in accordance to DOCCS policies and procedures to ensure compliance with the SHU exclusion law.

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

QMHC Findings/Recommendations and OMH/DOCCS Response:

Records reviewed indicated that one inmate/patient's treatment plan was contradictory to the collateral information in his core history. OMH staff at the Downstate CF were provided additional training in CNYPC CBO Policy #9.22 - Treatment Plan with an emphasis on

accuracy as it was determined that the inmate/patient's substance abuse history was not included in his treatment plan.

An inmate/patient did not receive his Initial Psychiatric Progress Note within the required timeframe. OMH acknowledged that the inmate/patient was not evaluated in the time allotted as per policy and retrained staff in CNYPC CBO Policy #9.27 – Psychiatric Progress Notes.

Multiple Residential Crisis Treatment Program (RCTP) Observation Referral to the Clinical Director/Designee Notes were not completed according to policy. OMH determined that the consults did occur within the appropriate timeframe, however were not documented in the clinical case record. Staff involved in this area of care were retrained in CNYPC CBO Policy #9.30 – Progress Notes specifically the section on RCTP Observation Referral to the Clinical Director/Designee Notes.

The Justice Center brought to the attention of OMH three inmate/patients that were requesting to be seen. The Justice Center requested that OMH provide documentation that these inmate/patients were seen and received appropriate treatment. OMH stated that the inmates and/or patients were all seen as clinically appropriate. The Justice Center was unable to review documents to confirm this statement because OMH made them available for review only at the Central New York Psychiatric Center in Marcy, NY due to their concern about the confidential nature of the records.

Specific documents within the clinical case records were flagged and not included in the initial packet supplied to the Justice Center. The OMH records in question were mailed to the Justice Center on August 4, 2017 and there were no additional findings.

Woodbourne

Visit Overview: conducted 7/25/2017; 9 cell-side interviews conducted with 2 private interviews accepted; 9 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 Special Housing Unit (SHU)/Long Term Keeplock Mental Health Interview form was not completed within one business day. OMH stated that they were not alerted of the transfer to the SHU and DOCCS replied that to ensure that OMH is alerted of all admissions, a copy of the Suicide Prevention Screening Guidelines form will be supplied to OMH.

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 that SHU Mental Health Interviews contained detailed and thorough notes.

An inmate/patient's current mental health service level needed to be clarified to ensure appropriate continuity of care. The Justice Center also requested documentary evidence be

provided with the inmate/patient's proper mental health service level. OMH acknowledged that a mental health service level change was not documented in all areas of the clinical case record and offered training to staff in CNYPC CBO Policy #9.12 – Treatment Needs/Service Level Designation and #9.7 Chronological Record, as well as updating the record to ensure accurate documentation.

Collins

Visit Overview: conducted 8/1/2017; 114 cell-side interviews conducted with 9 private interviews accepted; 26 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: 20 records reviewed for quality of mental health care provided with findings of concern identified.

QMHC Findings/Recommendations and OMH/DOCCS Response:

Two inmates were considered active screens for OMH services at the time of the site visit. The Justice Center requested an update as to whether they were admitted to the mental health caseload and what their assigned mental health service level was. OMH's response to the Justice Center stated that they would not provide clinical documentation, or any update regarding specific patient information and informed the Justice Center that they could make the pertinent clinical records available for review at the OMH Division of Forensic Services in Albany, NY.

Three inmate/patients did not receive mental health services, specifically primary therapist progress notes and psychiatric progress notes, per policy. It was requested that OMH assess how best to ensure that inmate/patients are seen per policy to assess their current mental health status. In addition, the Justice Center requested the OMH Unit Chief review two clinical records to ensure services were properly documented and lastly, requested that OMH provide an update as to whether psychiatric staff met with an inmate/patient following his admission to services. OMH stated that a thorough review of the three clinical records were completed and two of the three were evidenced to have all required documentation and reflected that CNYPC policy guidelines were followed.

Eastern

Visit Overview: conducted 9/8/2017; 26 cell-side interviews conducted with 3 private interviews accepted; 20 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 Special Housing Unit (SHU)/Long Term Keeplock Mental Health Interview form for two inmates were not completed within one business day.

QMHC Findings: 20 records reviewed for quality of mental health care provided with no findings identified.

QMHC Findings/Recommendations and OMH/DOCCS Response:

Justice Center requested clinical documentation from our September 8, 2017 site visit and September 12, 2017 letter that seven inmates and/or patients were seen by mental health staff as requested. OMH did not respond to the Justice Center's October 5, 2017 correspondence, although a response was requested by November 6, 2017.

Marcy Residential Mental Health Unit (RMHU)

Visit Overview: conducted 9/11/2017; 95 cell-side interviews conducted with 10 private interviews accepted; 21 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 and the exceptional circumstances process.¹ During the Justice Center's review there were 21 inmate/patients placed on exceptional circumstances.

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

QMHC Findings/Recommendations and OMH/DOCCS Response:

Two Residential Crisis Treatment Program (RCTP) Observation Referral to the Clinical Director/Designee Notes were not completed per policy. The Justice Center recommended that OMH consider additional training for staff. OMH responded that they reviewed the associated clinical records and a retraining on CNYPC CBO Policy #9.30 – Progress Notes, specifically the section pertaining to the RCTP Observation Referral to the Clinical Director/Designee Notes was completed on 12/7/17.

An inmate/patient was not seen by psychiatric staff according to policy. The Justice Center requested OMH assess how to ensure that inmate/patients are evaluated and assessed as delineated by a treating psychiatrist. OMH acknowledged that they reviewed the associated clinical record and a retraining on CNYPC CBO Policy #2.40 – Canceled/Refused/Missed Call Outs was completed on 12/7/17.

An inmate/patient was not provided monthly sessions with his primary therapist. OMH was asked to consider retraining to confirm that notes are completed and time frames are adhered to. OMH acknowledged that they reviewed the associated clinical record and a retraining on CNYPC CBO Policy #9.30 – Progress Notes was completed on 12/7/17.

The Justice Center found that one inmate/patient did not participate in mental health treatment at all during the six months reviewed. The Justice Center recommended that the

¹ Restrictions on programming, property, services or privileges may be imposed for an inmate with Serious Mental Illness who is housed in the RMHTU if the inmate poses an unacceptable risk to the safety and security of inmates and staff

Regional Psychiatrist or Clinical Director review his care due to his prolonged disengagement with treatment and update his treatment plan. DOCCS responded to the Justice Center that the inmate/patient in question had been reviewed by the treatment team during their “chronic refuser” meeting to find avenues to engage him in treatment. OMH stated that the Justice Center concerns were addressed and there was a marked improvement in the inmate/patient’s engagement with treatment. The Justice Center was unable to review documents to confirm this statement because OMH would only make records available for review at the OMH Division of Forensic Services in Albany, NY due to their concern about the confidential nature of the records.

For the six-months reviewed, the majority of informational reports completed were negative.² The Justice Center recommended that both OMH and DOCCS staff members review the purpose of the Informational Reports and OMH should consider establishing a procedure for writing an informational report. DOCCS indicated that the Marcy RMHU staff were having issues with cell compliance during the Justice Center’s review period and instead of writing misbehavior reports after several attempts to gain compliance, they were using the informational reports. OMH acknowledged that the use of the informational report was discussed at a statewide training for staff working in Residential Mental Health Treatment Units. They will also be monitoring the relevant data to verify improvements in this area over time.

During the Justice Center’s visit, twelve inmates and/or patients requested to be seen by OMH. The Justice Center requested clinical documentation that these individuals were seen by mental health staff as requested. OMH stated that the referrals were followed up by OMH staff as clinically appropriate and in accordance with their policies and procedures.

² The informational report is utilized to convey information (whether positive or negative) to the Treatment Team to take into consideration for clinical assessment and security consideration. It is an additional tool that allows staff to document less serious inmate conduct which needs to be brought to the attention of the Treatment Team without utilizing the more formal disciplinary process.