

State of Iowa Department of Corrections

Policy and Procedures

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Chapter 6: Health Services

Sub Chapter: Mental Health

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Subject: Mental Health Transfers

ACA Standards: 5-ACI-6A-05, 5-ACI-6A-28, 5-ACI-6C-06, 5-ACI-6C-12

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Authority:

1. PURPOSE

To ensure patients are appropriately housed in an area that meets their mental health needs.

2. POLICY

It is the policy of the Iowa Department of Corrections (IDOC) to have a procedure in place to ensure patients with Special Needs are placed in an appropriate level of care/housing.

3. DEFINITIONS

- A. Serious Mental Illness (SMI) - A serious and persistent disorder of thought or mood which significantly impairs judgment, behavior, capacity to recognize reality or cope with the ordinary demands of life within the prison environment which is manifested by substantial suffering or disability. Serious mental illness requires a documented mental health diagnosis, prognosis and treatment as appropriate by mental health staff. This would include the broad categories of:

1. Schizophrenia and other psychotic disorders

2. Bipolar Disorders
3. Major Depressive Disorders
4. Dementia and other organic brain disorders

(See *SMI/SN Lists*, Form **HSF-731B**, for a complete list of diagnoses)

B. Special Needs (SN) - Patients who have a diagnosis considered a SMI all fall into the category of Special Needs. In addition, patients with the following diagnoses will also be considered Special Needs:

1. Borderline Personality Disorder
2. Intellectually and Developmentally Delayed/Disabled and their disorders

(See *SMI/SN Lists*, Form **HSF-731B**, for a complete list of diagnoses)

C. Other Mental Illness (OMI) - All other mental health diagnoses included in the DSM-IV-TR that are not considered Special Needs (SN).

D. Mental Health Continuum of Care - The various levels of care available which afford an patient the opportunity to move through the levels as appropriately determined by individual patient assessment/need.

E. Intra-System Transfer - Transfer of patients from one institution to another within the IDOC.

F. Inter-System Transfer - New or returning admissions to the IDOC.

G. See IDOC Policy **AD-GA-16** for additional Definitions.

4. PROCEDURE

Mental Health staff will review each transferred patient's mental health information to ensure continuity of care.

A. Intra-System Transfers

1. A Mental Health Level (MHL) Review will be completed by psychologists utilizing Medical ICON form on all patients who have a current/active SMI/SN diagnosis as identified in IDOC Form **HSF-731B**, *SMI SN List*, and documented in the electronic medical record prior to intra-system transfer.

2. MHL Review documentation is reviewed and verified by the Mental Health Director/designee and notification of that review is e-mailed to the sending institution. The sending mental health care professional and Patient Services designee are notified of completion of review or any modification necessary as a result of the review.
3. The sending institution's mental health care professional notifies the treatment team of the identified MHL for the transfer process.
4. MHL with review of treatment planning is updated and documented in the electronic medical record by psychology at least once every thirty (30) days while the patient is waiting to be transferred to a higher level of care, or more often if a change in mental health status occurs.

B. Transfer of Patients with Other Mental Illness (OMI)

1. The sending mental health care professional shall review the chart focusing on mental health care plan, programming needs, housing status, disciplinary reports, etc. for the past six months. If there are no mental health concerns, the mental health care professional completes a psychology encounter in Medical ICON.
2. If concerns are identified, a mental health professional will arrange for further assessment.

C. Intra-Agency Transfers

Each institution shall develop a procedure for changes in MHL and movement of those patients within their facility.

D. Transfer for Admission to the IDOC Mental Health Housing Units

1. Mental Health Referral to the IDOC Mental Health Housing Units requires a MHL Review and application form **HSF-741A**, *IDOC MH Housing Unit Application*, to be completed and forwarded to the IDOC Health Services Administrator/designee for review at the weekly Mental Health Housing Utilization Review Committee meeting. This committee coordinates mental health bed utilization throughout the IDOC.
2. A formal reply will be sent to the requesting institution so appropriate arrangements can be made for transfer.

E. Emergent Transfers

For emergent transfer needs, the request/application must go through the IDOC Health Services Administrator/designee, Offender Services Manager or the IMCC Director of Nursing. Concerns for emergent transfer should be preceded with a telephone conversation directly from the sending facilities' mental health care professional and/or Nursing Director.