

# State of Iowa Department of Corrections

## Policy and Procedures

Policy Number: FPH-22

Applicability: Institutions

Policy Code: Public Access

Iowa Code Reference: Chapter 904, 812, 229

Chapter 10: Forensic Psychiatric Hospital

Sub Chapter: Procedures

Related DOC Policies: HSP-701

Administrative Code Reference: 481

Subject: Forensic Psychiatric Hospital Meeting Structure

PREA Standards: NA

Responsibility: Warden Mike Heinricy, Dr. Theresa Clemmons

Effective Date: May 2024

Authority:

### 1. PURPOSE

To conduct meetings in the Forensic Psychiatric Hospital (FPH) which provide leadership and facilitate interdisciplinary communication.

### 2. POLICY

Meetings within the Forensic Psychiatric Hospital are necessary in order to promote teamwork, to facilitate communication and to create a forum for input from all disciplines to improve decision making. Each meeting shall have a specific purpose with the intent of producing measurable outcomes.

### 3. Procedures

Meeting Structure/Communication for Forensic Psychiatric Hospital - There will be a weekly Utilization Review Meeting, a quarterly Forensic Psychiatric Hospital Bylaws Leadership Meeting, and a monthly Work Group Meeting.

#### A. Utilization Review Meeting

1. The Utilization Review meeting will be conducted weekly and led by the Forensic Psychiatric Hospital Psychiatrist/Designee. The patient is not present during the UR Meeting.
  - a. State of Iowa statute pertaining to confidentiality of records, as well as overall professional standards of confidentiality, applies to all Utilization Review Committee activities and is considered confidential in nature.
  - b. The initial agenda item is to review all patients.
  - c. Each week, all new completed applications for admission are reviewed. Applications approved for admission are placed on a waiting list. Denied applications will be referred back to the county of jurisdiction.
  
2. Highlight the high risk and most challenging patients:
  - a. Major concerns, those patients who are struggling, or whom the team is struggling with their care or meeting their goals. The team is seeking help with these patients or they are identified as important for the UR members to be aware of their status.
  - b. Those in seclusion or are being restrained.
  - c. Those with daily orders being written.
  - d. Special circumstances.
  
3. Review all admissions and discharges.
4. Review possible or planned admissions from the waiting list.
5. Review court deadlines/timeframes required by the courts.
6. Review evaluation schedule.

## **B. Forensic Psychiatric Hospital Bylaws Leadership Meeting**

1. Membership includes:

- a. DOC Health Services Administrator/Designee
- b. Nursing Services Administrator/Designee
- c. Psychiatrists
- d. Psychologist
- e. Physician
- f. PA
- g. ARNP
- h. Students/Interns
- i. Warden/Designee
- j. Associate Warden of Security/Designee
- k. Associate Warden of Treatment/Designee
- l. Secretary
- m. Mental Health Counselor
- n. Social Worker
- o. Dentist
- p. Physical Therapist
- q. Dietitian
- r. Respiratory Therapist
- s. Dental Auxiliary Staff
- t. Members from outside of the DOC may be approved by the Bylaws chairperson.

2. Role - The FPH Bylaws Leadership Team is charged with broad areas of responsibility including:

- a. Determining the mission and vision that charts the future direction of the FPH.
- b. Strategic planning and policy development.
- c. Monitoring the performance of the FPH and services provided.
- d. Assuring quality and safety for patients and staff.
- e. Maintaining accountability to the public and the Iowa Judicial System.
- f. Understanding and ensuring compliance with the rules and regulations of governing the Forensic Psychiatric Hospital.
- g. Serving as a patient advocate.
- h. Ensuring that all patients admitted to the psychiatric hospital receive the best possible mental health care as related to (a) admission criteria, (b) treatment methods utilized, (c) final diagnosis(es), (d) decisions relating to patient discharge, and (e) coordination with the IMCC Health Services Administrator and Warden to address provision of services by security, dental, nursing, activities, social work and counselor.
- i. Providing a means whereby problems of medical-administrative nature may be discussed by the Health Services staff and Administration.
- j. Initiating and maintaining rules and regulations for government of the Health Services staff.
- k. Maintaining high standards in Quality Improvement and appropriateness relative to professional services provided.
- l. Promoting and maintaining effective staff development through in-service training and utilization of learning experiences external to the hospital.

m. Adhering to all Regulatory Agency Requirements.

### **C. Forensic Psychiatric Work Group**

The FPH Work Group represents the clinical disciplines within the FPH and meets to review and recommend FPH policies, develop patient programs, deal with concerns and develop initiatives to improve quality and other operational issues. The team meets at a minimum of monthly. Membership may include psychiatrist, psychologist, nurse manager designee, social worker, correctional counselor, correctional officer, executive officer, secretary and therapeutic recreation specialist.