



POLICY DIRECTIVE

Policy:	DOC 4.5.27 OFFENDER MENTAL HEALTH SERVICES
Effective Date:	09/01/1998 Page 1 of 2
Revision Date(s):	06/14/2001; 03/26/2002; 04/18/2006; 10/27/2009; 08/11/2017; 04/19/2021; 04/24/2026
Department Director Signature:	/s/ Eric Strauss, Director
Medical Director Signature:	/s/ Dr. Paul Rees, MD
Health Services Bureau Chief Signature:	/s/ Cynthia McGillis-Hiner, RN, MSN

I. POLICY

Department facilities will provide access to mental health services at intake and as clinically indicated for offenders who require them.

II. APPLICABILITY

All secure facilities Department-owned and contracted, as specified in contract.

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

A. General Requirements

1. Patients' mental health needs are addressed on-site or by referral to appropriate alternative facilities or community services.
2. Outpatient services include, at minimum:
 - a. identification and referral of inmates with mental health needs;
 - b. crisis intervention services;
 - c. psychotropic medication management, when indicated;
 - d. individual counseling;
 - e. group counseling and/or psychosocial/psychoeducational programs; and
 - f. treatment documentation and follow-up.
3. When commitment or transfer to an inpatient psychiatric setting is clinically indicated:
 - a. required processes are followed;
 - b. transfers occur in a timely manner; and
 - c. patient is safely housed and adequately monitored until the transfer occurs.
4. Offenders receiving outpatient mental health services are seen as clinically indicated but no less than every 90 days, and as prescribed in their individual treatment plans.

5. Mental health, medical, and substance abuse services are sufficiently coordinated so that patient management is appropriately integrated, medical and mental health needs are met, and the impact of these conditions on each other is adequately addressed.

B. Commitment or Transfer to Inpatient Psychiatric Setting

1. When commitment or transfer to an inpatient psychiatric setting is clinically indicated:
 - a. required processes are followed;
 - b. transfer occurs in a timely manner;
 - c. until transfer occurs and patient is safely housed, patient is adequately monitored and appropriately treated.

C. Patient Management

1. Mental health, medical, and substance use services are sufficiently coordinated such that patient management is appropriately integrated, medical and mental health needs are met, and the impact of these conditions on each other is adequately addressed.

V. CLOSING

Questions about this policy should be directed to the Health Services Bureau Chief.

VI. REFERENCES

- A. *P-f-02 National Commission on Correctional Health Care Standards for Health Services in Prisons, 2026*
- B. *MH-f-02 National Commission on Correctional Health Care Standards for Mental Health Services in Correctional Facilities, 2026*
- C. *Y-f-03 National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities*
- D. *Performance-Based Standards and Expected Practices for Juvenile Correctional Facilities, Fifth Edition, 2025*