



POLICY DIRECTIVE

Policy:	DOC 4.5.53 MENTAL HEALTH PROGRAMS AND RESIDENTIAL UNITS
Effective Date:	04/19/2021 Page 1 of 2
Revision Date(s):	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

The Department will ensure that mental health programs meet the serious mental health needs of offenders.

II. APPLICABILITY

All Department secure facilities.

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

A. General Requirements

1. Mental health programs without a residential component, when provided on-site, are approved by the responsible mental health clinician and have, at minimum:
 - a. defined goals;
 - b. mental health staff of sufficient numbers and kind in keeping with program purposes;
 - c. individual treatment plans; and
 - d. protocols for offender follow-up at least every 60 days.

B. Acute Mental Health Residential Units

1. Acute mental health residential units, when provided on-site, are consistent with their defined scope of care to provide for offenders who are psychotic, clinically unstable, acutely suicidal, or at imminent risk of self-harm, and have, at minimum:
 - a. continuous (24 hours per day, 7 days per week) coverage by mental health staff assigned to the unit;
 - b. orientation and training for correctional officers assigned to the unit;
 - c. daily (7 days per week) offender evaluation by mental health staff;
 - d. programming or appropriate therapies, as indicated;
 - e. individual treatment plans; and
 - f. housing in a safe and therapeutic environment conducive to symptom stabilization and maintenance of good personal hygiene.

C. Nonacute Mental Health Residential Units

1. Nonacute mental health residential units, when provided on-site, have at minimum:
 - a. defined scope of care;
 - b. either programming or appropriate therapies (or both) to meet the mental health needs of the offenders in the unit;
 - c. mental health staff of sufficient numbers and kind in keeping with the purpose of the unit;
 - d. individual treatment plans;
 - e. orientation and training for correctional officers; and
 - f. a clean, safe, therapeutic environment and milieu, including facilities for maintaining good personal hygiene with guidance in the activities of daily living, if needed.

V. CLOSING

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

VI. REFERENCES

- A. *MH-G-02; National Commission on Mental Health Services in Correctional Facilities, 2015*