# **GENERAL DISTRIBUTION**

**WEST VIRGINIA** DIVISION OF CORRECTIONS & REHABILITATION

**NUMBER: 410.16** 

**EFFECTIVE DATE:** 

21 September 2023

SUBJECT: MENTAL HEALTH **SCREENINGS AND ASSESSMENTS** 

# **POLICY DIRECTIVE**

## **PURPOSE:**

To ensure mental health screenings and assessments are conducted in accordance with applicable standards and to meet the mental health needs of all offenders in Division of Corrections and Rehabilitation facilities.

### **REFERENCE:**

National Commission on Correctional Health Care §§P-E-05, J-E-05, and Y-E-05; and Performance-based Standards (PbS) Behavioral Health 01, 02, 03 and Health 01, 05, 06.

#### **RESPONSIBILITY:**

No additional written instructions on this subject are required.

## **CANCELLATION:**

Any previous written instruction on the subject including DOC Policy Directive 410.16, dated 01 April 2014.

## **APPLICABILITY:**

All facilities within the Division of Corrections and Rehabilitation (DCR). This Policy is available for general distribution.

# **DEFINITIONS:**

**Qualified Mental Health Professional:** Include psychiatrists, psychologists, psychiatric social workers, psychiatric nurses, psychiatric nurse practitioners, and psychiatric physician assistants and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for the mental health needs of patients.

## **POLICY:**

- I. Medical receiving screenings conducted upon admission to the correctional system identify urgent and emergent health needs including mental health needs. Individuals with a positive mental health screening or appraisal receive expedited mental health care.
  - A. Offenders who arrive on verifiable, prescribed psychotropic drugs, are continued on the existing medications until evaluated by a psychologist/psychiatrist.
  - B. Acutely suicidal or psychotic offenders are considered emergencies and placed in a "safe" setting until evaluated by a qualified mental health professional.
  - C. Within the first hour of admission, juvenile residents complete the Massachusetts Youth Screening Instrument-2 (MAYSI-2) administered by trained correctional staff with special attention to scores on the depression and suicidal ideation scales.
- II. For adult inmates, in addition to the mental health portion of the medical receiving screening, an initial mental health screening is conducted by qualified mental health professionals as soon as possible but no later than fourteen (14) calendar days of admission.
  - A. The screening includes a structured interview with inquiries into the offender's history of psychiatric hospitalization and outpatient treatment; substance use hospitalization; withdrawal seizures; detoxification and outpatient treatment; suicidal behavior; violent behavior; victimization; special education placement; cerebral trauma; sexual abuse; and sex offenses.
  - B. The screening also examines the offender's current status of psychotropic medications; suicidal ideation; drug or alcohol use, withdrawal or intoxication; orientation to person, place, and time; and emotional response to incarceration.
  - C. A screening for intellectual functioning (e.g., intellectual disability, developmental disability, learning disability) is also conducted.
  - D. Should the mental health screening indicate the offender requires further treatment, an individualized treatment plan is developed.
  - E. In addition to the initial mental health screening, mental health assessments are conducted following a mental health crisis (e.g., suicidal threats or behavior) and upon referral by health care or facility staff.
- III. For juvenile residents, a mental health assessment is performed on each newly committed youth within seven (7) days of admission to the commitment facility (or if a psychological evaluation is received which is less than 6 months old). This assessment is more comprehensive than a screening and assesses the youth's behavioral health needs includes mental health and substance use, as well as risk of suicide/self-harm, traumatic stress and vulnerability to victimization and risk of harming others.

IV.	The results of all mental health screenings and assessments are contained in the offender's
	healthcare record. Juvenile facilities without access to electronic healthcare records will
	continue to maintain this information in the resident's record in the Offender Information
	System (OIS).

ATTACHMENT(S):

None.

APPROVED SIGNATURE:

William K. Markall

William K. Marshall III, Commissioner

Sept 21, 2023

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