Mental Health Standards: An Essential Resource

IMPROVED AND UPDATED Standards for Mental Health Services in Correctional Facilities will soon be available from NCCHC.

With more than 50% of all jail and prison inmates suffering from a mental health problem (Bureau of Justice Statistics, 2006), NCCHC’s mental health standards are an indispensable tool to help correctional facilities determine proper levels of care, organize systems more effectively and efficiently, and demonstrate that constitutional requirements are being met. They also serve as the foundation for NCCHC’s mental health services accreditation program, as well as specialty certification in correctional mental health, CCHP-MH.

The revised edition represents hundreds of hours of careful review by a prestigious group of mental health experts, including specialists in psychiatry, psychology, social work and professional counseling. As with the first edition, published in 2008, the updated manual aligns with NCCHC’s jail and prison Standards, covering care and treatment, clinical records, administration, personnel and legal issues. The Mental Health Standards, however, make more explicit what is required for constitutionally acceptable delivery of mental health services.

Standards for Mental Health Services in Correctional Facilities will be introduced at the NCCHC Spring Conference, April 11-14 in New Orleans, and available from the NCCHC online store at www.ncchc.org.
In the Field With a Survey Team: An Up-Close Look at NCCHC’s Commitment to Excellence

Part of my discovery process as NCCHC’s new president and CEO has been to immerse myself in all areas of the Commission – accreditation, certification, education and publications – to get a firsthand look at how the Commission operates. That includes going out in the field with accreditation survey teams to see exactly how our survey process works.

My first accreditation survey visit was to the Southwestern Illinois Correctional Center in East St. Louis, IL, where I accompanied lead surveyor James Voisard, BS, CCHP-A (a surveyor for more than 30 years) and physician surveyor Dianne Rechtine, MD, CCHP-A (a surveyor for nearly 20 years). Watching these veteran surveyors in action, it did not take me long to understand why NCCHC accreditation is considered the gold standard by jails, prisons and juvenile detention and confinement facilities throughout the United States.

Unlike other accreditation bodies, NCCHC assigns a physician and other correctional health care professionals to every survey team. Their commitment to excellence helps to ensure that those incarcerated receive the care to which they are constitutionally entitled: the right to access to care, the right to care that is ordered and the right to a professional medical judgment. Those rights serve as the foundation for the NCCHC Standards and the accreditation survey.

During the SWICC survey, I quickly realized that NCCHC accreditation relies on an impartial, unbiased and expert review of medical records and procedures. I was extremely impressed by both surveyors’ knowledge of NCCHC’s standards, their unwavering commitment to the accreditation survey process and their dedication to the correctional health care field.

NCCHC accredits nearly 500 correctional facilities, which supports the health of nearly 500,000 inmates each and every day. I thank Dr. Rechtine, Mr. Voisard and all of the NCCHC surveyors who help ensure that these inmate-patients across the country receive quality health care.

Best regards,
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Join Us in Recognizing Our Colleagues

Each year, NCCHC recognizes accredited correctional facilities for excellence in health services delivery and professionalism and for their programs of excellence. We congratulate the 2014 awardees.

Facility of the Year: The Casper Re-Entry Center, a private drug and alcohol treatment facility in Casper, WY, was named the R. Scott Chavez Facility of the Year for the comprehensive, individualized care it provides to addicted Wyoming State prisoners and Native American men from around the country. Operated by Community Education Centers, Inc., the Casper Re-Entry Center staff was honored for its commitment to helping its patients remain healthy and drug- and alcohol-free upon reentry.

Program of the Year: The Berkshire County Jail and House of Corrections in Pittsfield, MA, was named Program of the Year in recognition of its long-term, multidisciplinary care and discharge planning program, which includes mental health, substance abuse, case management, education, medical and security, as well as job prospecting, interviews and help with housing needs, transportation requirements and medical aftercare. Facility officials report that their three-year recidivism rate has declined from 44.1% in 2006 to 33.0% in 2012.

More information on the awards and the 2014 honorees can be found at www.ncchc.org/awardwinners.
Ask the Experts: NCCHC Answers Your Questions

Determining Genital Status per PREA

Q: Our administrators are having trouble deciding how to approach PREA Standard 115.15 Limits to Cross-Gender Viewing and Searches, in particular part (e), which addresses trying to determine an inmate’s genital status. The PREA standard states that it can be accomplished by conversing with the inmate, by reviewing medical records or as part of a broader medical examination. Our medical staff state that they are not to be involved in the process of determining genital status. Does NCCHC limit them in this way?

A: In NCCHC’s 2014 Standards for Health Services, standard B-04 Federal Sexual Abuse Regulations only requires written policy and defined procedures for how the facility will comply with this federal law. The situation you describe extends to other areas of the standards, particularly involving a patient’s right to privacy and confidentiality of health records. Medical practitioners may learn of an inmate’s genital status through routine medical examinations for medical purposes, such as during the initial health assessment. Health staff should not do an exam for the sole purpose of determining genital status. NCCHC standard A-09 Privacy of Care requires that discussions among staff regarding patient care occur in private, without being overheard by inmates and nonhealth staff, and that clinical encounters occur in private, without being observed or overheard. Standard H-02 Confidentiality of Health Records requires that health records are stored and maintained under secure conditions separate from correctional records, and that health staff receive instruction in maintaining patient confidentiality. However, local, state or federal laws may allow certain exceptions to the obligations of health care professionals to maintain confidentiality. The responsible health authority should maintain a current file on the rules and regulations covering confidentiality and a list of the types of information that may or may not be shared. Health staff should inform inmates at the beginning of the health care encounter when these circumstance apply. Otherwise, releasing confidential medical information to nonhealth staff would require the written consent of the patient.

NCCHC Position Statements on the Challenges You Face

In addition to its respected Standards for Health Services, NCCHC position statements can help you design policies and procedures that benefit your facility, inmate-patients and the community at large.

New! Optimizing Insurance Coverage for Detainees and Inmates Postrelease
New! STD Testing for Adolescents and Adults Upon Admission
Updated! Administrative Management of HIV in Correctional Institutions
Updated! Women’s Health Care in Correctional Settings
Updated! Health Care Funding for Incarcerated Youth

Download these statements and more at www.ncchc.org under the “Standards and Guidelines” tab.
Supporting Organizations

NCCHC’s supporting organizations represent the fields of health, law and corrections.

- Academy of Correctional Health Professionals
- Academy of Nutrition and Dietetics
- American Academy of Child and Adolescent Psychiatry
- American Academy of Pediatrics
- American Academy of Physician Assistants
- American Academy of Psychiatry and the Law
- American Association of Public Health Physicians
- American Bar Association
- American College of Emergency Physicians
- American College of Healthcare Executives
- American College of Neuropsychiatrists
- American College of Obstetricians and Gynecologists
- American College of Physicians
- American College of Preventive Medicine
- American Correctional Health Services Association
- American Counseling Association
- American Dental Association
- American Health Information Management Association
- American Jail Association
- American Medical Association
- American Nurses Association
- American Osteopathic Association
- American Pharmacists Association
- American Psychiatric Association
- American Psychological Association
- American Public Health Association
- American Society of Addiction Medicine
- Association of State and Territorial Health Officials
- International Association for Correctional and Forensic Psychology
- National Association of Counties
- National Association of County and City Health Officials
- National Association of Social Workers
- National Medical Association
- National Partnership for Juvenile Services
- National Sheriffs’ Association
- Society for Adolescent Health and Medicine
- Society of Correctional Physicians

NCCHC will be speaking or exhibiting at:

- **Preventive Medicine 2015**, Atlanta, GA (February 25-28)
- **Northern California Corrections Association Keys Conference**, Concord, CA (March 16-19)
- **Jacksonville Sheriff’s Office**, Jacksonville, FL (March 20)
- **Western States Sheriffs’ Association**, Las Vegas, NV (March 25)
- **NCCHC Spring Conference on Correctional Health Care**, New Orleans, LA (April 11-14)
- **American Jail Association Annual Conference**, Charlotte, NC (April 19-22)

To set up a presentation at your event, contact Brent Gibson, MD, MPH, CCHP, vice president of operations, at brentgibson@ncchc.org.