

HOUSE No. 1887

By Ms. Khan of Newton, petition of Kay Khan and others relative to mental health examinations and services for inmates of certain correctional institutions in the Commonwealth. Mental Health and Substance Abuse.

The Commonwealth of Massachusetts

PETITION OF:

Kay Khan	John W. Scibak
Ellen Story	Patricia D. Jehlen
Timothy J. Toomey, Jr.	Gloria L. Fox
Douglas W. Petersen	Susan C. Tucker
Thomas M. Stanley	Edward M. Augustus, Jr.
Pamela P. Resor	Peter V. Kocot
Ruth B. Balsler	Michael E. Festa
Jennifer L. Flanagan	Elizabeth A. Malia
William N. Brownsberger	Carl M. Sciortino, Jr.
Steven A. Tolman	Cleon H. Turner
Barbara A. L'Italien	

In the Year Two Thousand and Seven.

AN ACT RELATIVE TO MENTAL HEALTH SERVICES IN MASSACHUSETTS CORRECTIONAL INSTITUTIONS, HOUSES OF CORRECTION AND JAILS.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 126 of the General Laws, as appearing in
2 the 2000 Official Edition, is hereby amended by inserting, after
3 section 27, the following new section:—
4 Section 28. Mental Health Examinations and Services.
5 The sheriff shall ensure that each person admitted to a county cor-
6 rectional facility, including a house of correction or jail, shall have
7 access to mental health care consistent with his or her needs. Mental
8 health care shall include but not be limited to suicide screening,
9 mental health and substance abuse screening upon admission or
10 transfer to a facility; mental health assessment within two weeks of
11 admission or transfer and periodically thereafter; a comprehensive
12 mental health evaluation within a time frame appropriate to the level

13 or urgency; suicide prevention; crisis intervention; an individualized
14 plan of care; psychiatric services, including medication and medica-
15 tion monitoring; individual and group psychotherapy; evaluation for
16 transfer to a mental health facility; and discharge planning, including
17 referral to appropriate mental health services at the time of release
18 and sufficient medication for continued treatment until enrollment in
19 a public or private health plan.

20 a.) Each such correctional facility shall comply with the principles
21 and guidelines of the current version of the American Psychiatric
22 Association Task Force Report on Psychiatric Services in Jails and
23 Prisons, or such higher standards as the sheriff may require, with
24 respect to the provision of mental health care.

25 b.) The department of mental health shall inspect each such cor-
26 rectional facility at least annually to determine compliance with this
27 section. The commissioner of mental health shall make a report of
28 the findings and any recommendations from each inspection to the
29 sheriff, including any recommendations for revisions to the stan-
30 dards for the provision of mental health care.

31 c.) The sheriff shall require in each such correctional facility
32 training of administrative, health care, and correctional staff
33 including but not limited to the symptoms of chronic and persistent
34 mental illnesses such as major depression, bipolar disorder, obses-
35 sive compulsive disorder, schizophrenia, and Borderline Personality
36 Disorder; the medications used to treat these illnesses, the side
37 effects of the medications, the types and causes of self-mutilation
38 and strategies for dealing with mentally ill inmates in crisis. The
39 sheriff shall develop protocols for said training in cooperation with
40 the commissioner of mental health.

41 d. The commissioner of mental health shall file an annual report
42 of its inspections of mental health care in county correctional facili-
43 ties for the prior year, including any recommendations, with the sec-
44 retary of public safety, the secretary of health and human services,
45 the commissioner of corrections, each sheriff, the house and senate
46 committees on ways and means, the joint committee on health care
47 financing, the joint committee on mental health and substance abuse
48 and the legislative mental health caucus.

1 SECTION 2. Chapter 127 of the General Laws, as appearing in
2 the 2000 Official Edition, is hereby amended by inserting, after
3 section 17, the following new section:—

4 Section 17A. Mental Health Examinations and Services.

5 The commissioner shall ensure that each person admitted to a
6 state correctional facility shall have access to mental health care con-
7 sistent with his or her needs. Mental health care shall include but not
8 be limited to suicide screening, mental health and substance abuse
9 screening upon admission or transfer and periodically thereafter; a
10 comprehensive mental health evaluation within a time frame appro-
11 priate to the level of urgency; suicide prevention; crisis intervention;
12 an individualized plan of care; psychiatric services, including med-
13 ication and medication monitoring; individual and group psy-
14 chotherapy; evaluation for transfer to a mental health facility; and
15 discharge planning, including referral to appropriate mental health
16 services at the time of release and sufficient medication for con-
17 tinued treatment until enrollment in a public or private health plan.

18 a.) Each such correctional facility shall comply with the principles
19 and guidelines of the current version of the American Psychiatric
20 Association Task Force Report on Psychiatric Services in Jails and
21 Prisons, or such higher standards as the sheriff may require, with
22 respect to the provision of mental health care.

23 b.) The department of mental health shall inspect each such cor-
24 rectional facility at least annually to determine compliance with this
25 section. The commissioner of mental health shall make a report of
26 the findings and any recommendations from each inspection to the
27 sheriff, including any recommendations for revisions to the stan-
28 dards for the provision of mental health care.

29 c.) The commissioner shall require in each such correctional
30 facility training of administrative, health care, and correctional staff
31 including but not limited to the symptoms of chronic and persistent
32 mental illnesses such as major depression, bipolar disorder, obses-
33 sive compulsive disorder, schizophrenia, and Borderline Personality
34 Disorder; the medications used to treat these illnesses, the side
35 effects of the medications, the types and causes of self-mutilation
36 and strategies for dealing with mentally ill inmates in crisis. The
37 commissioner shall develop protocols for said training in coopera-
38 tion with the commissioner of mental health.

39 d.) The commissioner of mental health shall file an annual report
40 of its inspections of mental health care in state correctional facilities
41 for the prior year, including any recommendations, with the secre-
42 tary of public safety, the secretary of health and human services, the
43 commissioner of correction, each sheriff, the house and senate com-
44 mittees on ways and means, the joint committee on health care
45 financing, the joint committee on mental health and substance abuse
46 and the legislative mental health caucus.