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**ADMINISTRATIVE REGULATION
NUMBER**

615

OPR: HEALTH SERVICES

PSYCHIATRIC EVALUATION

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes the responsibilities, policies, and procedures for completing psychiatric evaluations.

II. POLICY

ADOC policy is that a psychiatrist or nurse practitioner (in collaboration with a psychiatrist) will evaluate each inmate referred for evaluation to determine if a mental disorder is present and whether the individual should be placed on the mental health caseload and provided treatment or monitoring.

Any inmate may be referred for a psychiatric evaluation during the reception/intake process or at any point during incarceration. These evaluations are completed promptly and consistent with the type of referral (emergent, urgent, or routine).

III. DEFINITION(S) AND ACRONYM(S)

Refer to AR 602, *Mental Health Definitions and Acronyms*, for a complete glossary of terms. See below for specific terms used in this AR:

- A. **Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR)**: The widely used diagnostic classification system published by the American Psychiatric Association. ADOC uses the most recent version (DSM-5-TR).
- B. **Mental Health Code**: A letter code assigned to each inmate that indicates whether the inmate is on the mental health caseload and the level of treatment required.

- C. **Qualified Mental Health Professional (QMHP)**: A psychiatrist, psychologist, nurse practitioner, licensed counselor, psychiatric social worker, psychiatric nurse, or other clinicians, who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for the mental health needs of patients.
- D. **Serious Mental Illness (SMI)**: Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by QMHPs. (American Correctional Association, Restrictive Housing Expected Practices, January 2018).

IV. **RESPONSIBILITIES**

- A. The ADOC Director of Psychiatry is responsible for ensuring that the vendor protocols and templates used for psychiatric evaluations meet relevant professional standards.
- B. The ADOC Director of Mental Health Services is responsible for ensuring that the development and implementation of the vendor process results in timely psychiatric evaluations that meet ADOC quality expectations.
- C. The ADOC Regional Psychologists are responsible for oversight and monitoring to ensure that psychiatric evaluations meet timeliness and quality expectations.
- D. The vendor Psychiatric Director is responsible for ensuring that psychiatric providers complete psychiatric evaluations thoroughly, accurately, and timely.
- E. The vendor Mental Health Program Director is responsible for ensuring that all psychiatric staff are trained to complete psychiatric evaluations and to monitor the process for quality assurance and improvement.
- F. The facility's Mental Health Site Administrator or designee is responsible for ensuring that a copy of the Psychiatric Evaluation is always maintained in the most current volume of the health record.

V. **PROCEDURES**

- A. A psychiatric evaluation will be completed:

1. Following a referral by the Reception/Intake registered nurse or other QMHP per AR 610, *Reception Mental Health Screening and Evaluation*.
 2. At any point during incarceration when an inmate is referred via the referral/triage process, per AR 609, *Referral to Mental Health Services*.
 3. Upon admission to an SU or RTU, per AR 632, *Intensive Psychiatric Stabilization Unit*, or AR 633, *Residential Treatment Unit*, respectively.
 4. At any other time an evaluation is indicated per clinical judgment.
- B. Psychiatric evaluations are conducted out-of-cell in a confidential setting and can be done via telehealth.
- C. Review of prior records:
1. The psychiatric provider will document the review of any prior mental health records with clinical judgment determining how many years of records need to be reviewed. This review will include:
 - a. Any prior psychiatric evaluations completed within ADOC.
 - b. Any prior crisis placements, including Suicide Risk Assessments and Safety Plans.
 - c. Any prior treatment on a Stabilization Unit (SU) or Residential Treatment Unit (RTU).
 - d. Any prior treatment in the community.
 - e. Any other relevant mental health or medical records.
 2. When records of prior mental health treatment in the community, within ADOC, or another correctional system are *not* in the health record, the psychiatric provider or treatment coordinator will request these records. A copy of the signed information release form will be placed in the current record.
 3. When conducting telehealth, the psychiatric provider providing treatment must receive the mental health information prior to evaluating the inmate.

- D. Documentation of the diagnosis, mental health code, and SMI status:
1. All diagnoses will be recorded using terminology from DSM-5-TR.
 2. Any “rule-out” diagnosis will be accompanied by a plan to determine whether the possible diagnosis is verified. The steps to accomplish this goal will be stated in the plan section.
 3. The mental health code and SMI status will be accurately and consistently indicated throughout all documents related to the inmate’s care and recorded on:
 - a. ADOC Form MH-018, *Psychiatric Evaluation Template*.
 - b. ADOC Form MH-013, *Mental Health Coding Form*.
 4. All psychiatric diagnoses, the mental health code, and the SMI status will be recorded on ADOC Form H-1-a, *Health Record – Master Problem List*.
 5. All documentation will be filed in the medical health record or electronic health record (EHR) as soon as possible, and within 24 hours.

VI. DISPOSITION

Refer to AR 601, Mental Health Forms and Disposition.

VII. FORMS

Refer to AR 601, Mental Health Forms and Disposition for:

- A. ADOC Form H-1-a, *Master Problem List*
- B. ADOC Form MH-013, *Mental Health Coding Form*
- C. ADOC Form MH –018, *Psychiatric Evaluation*

VIII. SUPERSEDES

- A. This Administrative Regulation supersedes AR 615, *Psychiatric Evaluation*, dated November 2, 2022, and any changes.

IX. PERFORMANCE

This AR is published under the authority of and/or consistent with:

- A. Alabama Code Section 14-1-1.1, et seq.
- B. Braggs et al. v. Hamm et al., No. 2:14-cv-00601-MHT-JTA, in the U.S. District Court for the Middle District of Alabama.
- C. National Commission on Correctional Health Care: *Standards for Health Care in Prisons*, 2018 (P-E-05).

A handwritten signature in black ink, appearing to read "John Q. Hamm". The signature is written in a cursive, flowing style.

John Q. Hamm
Commissioner