

# INTRODUCTION TO JAIL HEALTHCARE 101

# EDUCATIONAL OBJECTIVES

- TO PROVIDE A LEGAL BACKGROUND OF CORRECTIONAL HEALTHCARE.
- TO PROVIDE THE GOALS OF A SOUND CORRECTIONAL HEALTHCARE PROGRAM.
- TO PROVIDE AN OVERVIEW OF THE KEY COMPONENTS OF A SOUND CORRECTIONAL MH CARE PROGRAM.
- TO PROVIDE INFORMATION ON OPPORTUNITIES FOR IMPROVEMENT WITHIN CORRECTIONAL HEALTHCARE.



# LEGAL ISSUES REGARDING INMATES RIGHTS TO RECEIVE BASIC HEALTHCARE

- ESTELLE VS. GAMBLE (1976 US SUPREME COURT): INMATES RIGHT TO TREATMENT FOR SERIOUS MEDICAL NEEDS
- BOWRING VS. GODWIN (1977 US SUPREME COURT): NO DISTINCTION BETWEEN PHYSICAL HEALTH AND MENTAL HEALTH NEEDS



# ACCREDITATION BODIES

- NCCHC



- ACA





# GOAL OF A SOUND CORRECTIONAL HEALTHCARE PROGRAM

- TO PROVIDE EFFECTIVE AND EFFICIENT HEALTHCARE IN THE MOST HUMANE MANNER POSSIBLE





# PROACTIVE SYSTEMS OF CARE

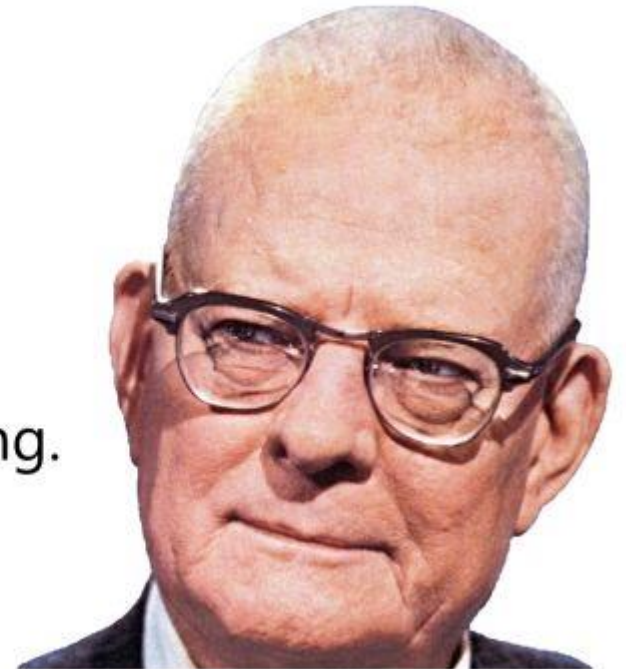
- TIMELY SCREENING
- CLEAR AVENUE FOR REFERRAL/EVALUATION
- SOUND CHRONIC CARE PROGRAM
- SOUND SICK CALL PROCESS
- EFFECTIVE MEDICATION SYSTEMS
- SEGREGATION ROUNDS
- EFFECTIVE DETOX PROGRAM
- AFTER-HOURS EMERGENCY ON-CALL SERVICES
- COMPREHENSIVE STAFF TRAINING
- FOCUSED CQI PROGRAM
- INTEGRATED CARE APPROACH
- DISCHARGE/REENTRY PLANNING

# CQI WITHIN CORRECTIONAL HEALTHCARE

- PROACTIVE FOCUS ON KEY PATIENT CARE AREAS
- INTAKE
- REFERRAL
- CHRONIC CARE
- EMERGENCY SERVICES
- DETOX
- MEDICATION ADMINISTRATION
- UTILIZATION OF SEGREGATION FOR SMI
- RESTRAINT/SECLUSION UTILIZATION
- SUICIDE PREVENTION
- REENTRY PLANNING

If you can't  
describe what  
you are doing  
as a process,  
you don't know  
what you're doing.

William Edwards Deming





# GROWTH OF MENTAL HEALTH IN JAILS/HOW DID WE GET HERE?

- DEINSTITUTIONALIZATION OF LONG TERM PSYCHIATRIC HOSPITALS.
- INEFFECTIVE COMMUNITY SYSTEMS OF CARE.
- CROSS-INSTITUTIONALIZATION
- PRISON AND JAILS BECOME THE PROVIDER OF BEHAVIORAL HEALTH SERVICES BY DEFAULT.



FRONT VIEW OF MAIN BUILDING - (Powell) 1904



# KEY COMPONENTS OF A CORRECTIONAL MENTAL HEALTH PROGRAM

- TRAINING OF MEDICAL AND SECURITY STAFF
- IDENTIFICATION
- REFERRAL
- EVALUATION
- EMERGENCY RESPONSE
- DETOX
- HOUSING
- MONITORING (SMI IN SEGREGATION)
- ACTIVE TREATMENT
- COMMUNICATION/TREATMENT/SECURITY
- SUICIDE PREVENTION
- REENTRY SERVICES



# DEVELOPMENTAL DISABILITY/MENTAL RETARDATION IN CORRECTIONS

- APPROXIMATELY 7% OF INCARCERATED POPULATION ARE PERSONS WITH DD
- MOST COMMON FUNCTIONING LEVEL BORDERLINE WITH AN IQ OF 70-79
- MILD WITH AN IQ OF 50-69



# SUBSTANCE ABUSE AND WITHDRAWAL IN CORRECTIONS

- HIGH PERCENTAGE OF NEWLY ADMITTED INMATES HAVE A DEPENDENCE ON ALCOHOL AND/OR OPIATES (ESPECIALLY PREVALENT IN JAILS AND LOCKUPS)
- SYSTEMS OF EARLY IDENTIFICATION AND TREATMENT ARE ESSENTIAL
- UNTREATED WITHDRAWAL CAN BE FATAL

# COMPONENTS OF A CORRECTIONAL BASED SUICIDE PREVENTION PROGRAM

- TRAINING – ALL STAFF NEED TO BE TRAINED REGARDING SUICIDE PREVENTION PROGRAM
- IDENTIFICATION – PROGRAM NEEDS TO ENSURE INMATES ARE SCREENED AT INTAKE FOR SUICIDE RISK
- REFERRAL – SYSTEMS NEED TO BE IN PLACE WHERE STAFF CAN REFER INMATES QUICKLY TO MEDICAL/MENTAL HEALTH STAFF
- EVALUATION – MEDICAL/MENTAL HEALTH STAFF NEED TO BE IN PLACE TO EVALUATE FOR RISK
- TREATMENT – PROGRAMS NEED TO BE DEVELOPED TO ADDRESS SYMPTOMS
- HOUSING/MONITORING – SPECIAL HOUSING NEEDS TO BE IN PLACE TO PROVIDE INCREASED SAFETY
- COMMUNICATION – CLEAR LINES OF COMMUNICATION BETWEEN SECURITY AND TREATMENT STAFF FOR RAPID REFERRAL



# KEY AREAS TO MONITOR FOR SUICIDE PREVENTION

- MEDICATION ADMINISTRATION
- POST-SENTENCING
- IMPENDING RELEASE
- SEGREGATION
- FIRST INCARCERATION
- HIGH VISIBILITY CRIMES

# OPPORTUNITIES FOR IMPROVEMENT IN CORRECTIONAL HEALTHCARE

- EARLY IDENTIFICATION OF ACUTE AND CHRONIC ILLNESSES
- INTEGRATED CARE APPROACH (REMOVING SILOS BETWEEN MEDICAL AND BEHAVIORAL HEALTH STAFF)
- REENTRY PLANNING/PARTNERING WITH COMMUNITY RESOURCES
- THE AFFORDABLE CARE ACT (AN OPPORTUNITY TO REDUCE RECIDIVISM AND IMPROVE ACCESS TO COMMUNITY BASED SERVICES)
- PROACTIVE LIFE SKILL PROGRAMING/PATIENT EDUCATION
- OTHER



# QUESTIONS/DISCUSSION



There is an old saying about the strength of the wolf is the pack, and I think there is a lot of truth to that. On a football team, it's not the strength of the individual players, but it is the strength of the unit and how they all function together.

— *Bill Belichick* —

AZ QUOTES