DEPARTMENT OF PUBLIC SAFETY
REPORT TO THE 2015 LEGISLATURE

S.B. 914, ACT 144 (2007)
MENTAL HEALTH SERVICES FOR COMMITTED PERSONS

November 2014
Department of Public Safety (PSD)
Annual Report to the Legislature on
Act 144: Status of the Mental Health Services for Committed Persons

Act 144 requires the Department of Public Safety (PSD) to submit a report to the Legislature no later than twenty days prior the commencement of the 2008 Regular Session, and every session thereafter.

PSD is required to report on 6 specific items of concern. The specific items, along with PSD’s status updates are listed below:

(1) **Assessment of PSD’s existing resources and staffing, and additional resources and staffing needed to bring mental health services up to standard and to keep up with future demands.**

   a. The focus of the Federal investigation and subsequent Settlement Agreement between the PSD and the United States Department of Justice (DOJ) is to bring the Oahu Community Correctional Center (OCCC) up to national standards for correctional mental health care. Currently, PSD is working under an extended corrective action plan with the DOJ. Much of the focus of the compliance plan is with mental health policies and procedures required to comply with the terms of the Settlement Agreement. OCCC is fully staffed to comply with these policies and procedures.

   b. During the 2014 Legislative Session, PSD requested and received staffing and other resources to address deficiencies in mental health care in the remaining correctional facilities. Positions were funded for half of FY 2015, with anticipated phase-in of positions over the course of FY 2014-2015. PSD has submitted a request to support the continued funding of these positions in the upcoming budget cycle.

   c. Other resources to support psychology internships in our correctional facilities were similarly initiated at OCCC. The FY2014-2015 budget includes $150,000 to continue this initiative. Recently, OCCC was accredited by the American Psychological Association (APA) for doctoral and post-doctoral internships. Depending on how quickly supervising psychology staffing can be expanded at each correctional facility, the expanded resources identified in the FY 2014-2015 budget will allow PSD to secure APA site surveys and accreditation for at minimum, the Women’s Community Correctional Center and possibly Halawa Correctional Facility (HCF).

(2) **The use of alternative services, such as the use of telemedicine, to provide mental health services to incarcerated offenders.**
a. A telemedicine system has been initiated across PSD’s correctional facilities. However, it is of limited practicality in the delivery of mental health care, since much of the direct provision of care attends to risk related assessments which require face-to-face interaction with inmates.

b. Tele-mental-health has demonstrated the greatest efficacy in the delivery of “group” outpatient care. PSD’s approach to the delivery of mental health care is fundamentally through “inpatient-type” treatment to inmates residing in special mental health units (modules) within the correctional facilities. The seriously mentally ill (SMI) inmates that can be effectively managed in the general population receive a label as an outpatient level of care, but our delivery is individual vs. group. Therefore, staff at each of the correctional facilities delivers the medication management and supportive counseling at an individual level across all correctional facilities.

c. $80,000 has been set aside in FY 2014-2015 to renovate two rooms as “sensory rooms” at HCF, for the purpose of de-escalating inmates in psychiatric crisis. At present, PSD is scheduling the positions required to staff the interventions, while appropriate rooms are being identified for renovation.

(3) The completion of a departmental training and policy manual.

a. PSD’s Health Care Division’s Mental Health Branch has developed updated training curriculum for the following: “Mental Health Services,” “Suicide Prevention,” and “Restraint and Seclusion.” Four-hour core courses are offered to all new employees in “Mental Health Services” and “Suicide Prevention,” with two-hour refresher courses every other year. “Restraint and Seclusion” is a two-hour core course with two-hour refreshers every other year. These trainings are targeted at staff that have direct contact with inmates. Additionally, all staff are required to have First Aid/ CPR training with periodic recertification.

b. PSD has updated many of its policies and procedures that are contained in a manual. All new employees are required to be familiar with this manual.

c. Policies and procedures related to mental health are reviewed annually for general operational updating, as well as to integrate any changes in practices to continue to remain current with or ahead of national standards.

(4) The appropriate type of updated record-keeping system.

PSD’s Health Care Division has recently initiated a new Electronic Medical Record (EMR) system that replaces hand-written /hard copy records. Currently, PSD’s Health Care Division is in the beginning stages of the “roll-out” of the system, with OCCC fully operational and HCF “in-training.” Over the next 6
months, the remaining correctional facilities will implement the new EMR and be “in-training.”

(5) **An update on the feasibility study initiated by the Departments of Health and Public Safety regarding the expansion of Hawaii State Hospital (HSH) to include a wing that will be able to adequately treat mental health patients who are incarcerated.**

a. At this time, PSD is unaware of the status of any activity on this initiative. HSH is “over census,” and has been for several years since the inception of the requirement outlined in this legislation. At this point in time, no capacity exists to entertain the designation of a wing or expansion to treat incarcerated mental health patients.

b. There is an assumption in this requirement that individuals with mental health disorders are not being treated “adequately” in PSD correctional facilities. However, PSD has been able to demonstrate more than adequate treatment at OCCC for these inmates. Despite some of the physical challenges of our antiquated correctional facilities, the care is “adequate” to “good,” and will continue to improve, particularly with the additional staff being phased-in during this fiscal year.

(6) **Any other suggestions or ideas to improve mental health services to incarcerated individuals to comply with local, state and federal laws and mandates.**

Periodically, inmates with extreme mental health disorders require long-term involuntary treatment with medication. Recognizing that PSD did not have the capacity to administer long-term involuntary medication for such individuals, PSD submitted and eventually obtained a new statute that permitted such treatment in the correctional facilities. It is PSD’s intent to continue to operationally refine this statute, as well as pursue statutes that are operational in other states to streamline the procedures for administering involuntary treatment with mental health medications.