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ADMINISTRATIVE REGULATION
NUMBER 630

OPR: TREATMENT

MENTAL HEALTH WATCH PROCEDURES

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes policies, procedures, and responsibilities for the management of inmates whose mental condition creates risks for danger to self or others to the extent that the inmate requires a single cell placement and close observation.

II. POLICY

Mental health watch procedures will be used for limited periods of time to protect an inmate from self-injury or from injury to others. The use of mental health watch procedures requires clinical justification and is not used for punishment or for the convenience of staff. It is used only when other less restrictive measures are not effective or clinically appropriate.

III. DEFINITION(S) AND ACRONYM(S)

Refer to AR 602 for definitions of the following terms used in this AR:

Crisis Cell

Suicide Watch

Precautionary Watch

Intensive Psychiatric Stabilization Unit (SU)

IV. RESPONSIBILITIES

- A. The ADOC Director of Treatment is responsible for developing standards for mental health watch procedures.

- B. The Institution's Supervising Psychologist will provide initial and annual training to all Contract Mental Health staff to ensure compliance with watch procedures.
- C. Correctional Supervisors will ensure that all correctional staff receive annual training and are familiar with procedures for initial placement and monitoring of inmates placed on watch status.
- D. Correctional Officers and Medical and Mental Health Nurses will monitor inmates who are on watch status and complete appropriate documentation.
- E. Mental health staff are authorized to initiate an inmate suicide watch. When mental health staff are not immediately present, then correctional supervisors may place an inmate on suicide watch.
- F. The Psychiatrist, Supervising Psychologist, or ADOC Psychologist/Psychological Associate is responsible for discontinuing Suicide Watch.
- G. The Psychiatrist is responsible for initiating and discontinuing an inmate on Precautionary Watch.

V. PROCEDURES

- A. The use of mental health watch procedures will be considered when an inmate:
 - 1. Attempts or threatens suicide
 - 2. Exhibits acute psychosis or significant impairment in functioning
 - 3. Acts out in a physically injurious manner
- B. Types of mental health watches:
 - 1. Suicide Watch: a standardized watch with designated periods of observation and inmate monitoring
 - 2. Precautionary Watch: a watch with varying observation and monitoring guidelines utilized only on the Intensive Psychiatric Stabilization Units (SU's) and requiring the order of a psychiatrist
- C. Suicide Watch procedures:
 - 1. Initiation of Suicide Watch procedure will be authorized by mental health staff, whenever possible. When mental health staff are not immediately present, correctional supervisors may place an inmate on Suicide Watch. Review of Suicide Watches, initiated by security supervisors, will be conducted by mental health staff with a face-to-face assessment of the inmate no later than the next working day.

2. Inmate placement on Suicide Watch:
 - a. Correctional officers will:
 - 1) Inspect the crisis cell prior to inmate placement to ensure that no items are available for potential self-harm.
 - 2) Place inmates in the crisis cell. Mental health and medical staff will assist in the process if requested. Every effort will be made to ensure inmate dignity, but this may be secondary in situations of potential harm to self or others.
 - b. The inmate will be stripped of all personal property and provided a safety tunic and safety blanket. No inmate will be left unclothed in the crisis cells.
 - c. Medical staff will evaluate the medical condition (i.e. vital signs and body chart with documentation in the medical progress notes) of the inmate after placement whenever the inmate's behavior permits.
 - d. Mental Health and Medical Nurses will initiate documentation of the use of Suicide Watch procedures on ADOC Form MH-045, Crisis Cell Utilization.
3. Staff monitoring of an inmate on Suicide Watch:
 - a. Documented monitoring by correctional officers every 15 minutes will be completed on ADOC Form MH-042, Mental Health Watch/Restraint Procedures.
 - b. A nursing assessment to include the inmate's vital signs will be documented each shift.
 - c. The inmate's Treatment Coordinator or assigned mental health staff will evaluate an inmate on Suicide Watch no less than once a day on workdays.
 - d. Trained medical nurses, with consultation of the on-call Psychiatrist, will provide the daily monitoring on weekends and holidays.
4. Correctional Officers will provide food at designated intervals. Liquids and the use of a toilet will be provided once each hour at the inmate's request.
5. Suicide Watch treatment planning:

- a. The treatment team for inmates requiring crisis intervention or watch procedures will consist of a Psychiatrist, a Mental Health Nurse and the Mental Health Professional serving as the inmate's Treatment Coordinator.
 - b. The initial treatment plan will be finalized within one working day of the inmate's placement on Suicide Watch and will be documented on ADOC Form MH-032, Treatment Plan. While members of the treatment team may complete specific items of the treatment plan, approval of the plan will occur during a multidisciplinary team meeting.
 - c. Treatment plans that are completed as a result of crisis intervention or watch procedures will be reviewed each workday that the inmate is housed in a crisis cell. Treatment team reviews/revisions will be documented on the ADOC Form MH-034, Treatment Plan Review, and on ADOC Form MH-040, Progress Notes.
6. Discontinuing Suicide Watch procedures requires an order from a Psychiatrist, a Supervising Psychologist, or ADOC Psychologist/Psychological Associate. This order may be a verbal order after documented consultation between the Psychiatrist or Supervising Psychologist and nursing staff.
 7. When Suicide Watch is discontinued, mental health and/or medical nurses will complete documentation of the use of Suicide Watch procedures on ADOC Form MH-045.
 8. If placement on Suicide Watch does not begin to resolve the inmate crisis within 72 hours, the inmate will be transferred to a SU.
 9. Documentation required when an inmate is on Suicide Watch:
 - a. A description of inmate behavior and rationale for initiating Suicide Watch procedures will be documented on ADOC Form MH-040 by mental health staff or medical nurses when mental health staff are not available.
 - b. An order for initiation of Suicide Watch procedures in Annex E, Physician Orders, if initiated by the Psychiatrist, or on ADOC Form MH-040, if ordered by other mental health staff.
 - c. An Incident Report shall be completed by Correctional Officers regarding the initiation of Suicide Watch procedures.

- d. Documentation of nursing assessments (i.e. vital signs) after placement on Suicide Watch and each shift thereafter in medical progress notes of inmate's medical record.
- e. Completed ADOC Form MH-042 documenting Correctional Officer monitoring, filed in mental health section of inmate's medical record.
- f. ADOC Form MH-032 and ADOC Form MH-034 will be filed after Annex C, Problem List, of inmate's medical record.
- g. Documentation of daily follow-up by the Treatment Coordinator or assigned mental health staff on ADOC Form MH-040 will be filed in the inmate's medical record.
- h. An order from a Psychiatrist, Supervising Psychologist, or ADOC Psychologist/Psychological Associate for discontinuing Suicide Watch procedures and providing plan for follow-up on ADOC Form MH-032.

D. Precautionary Watch procedures:

- 1. Precautionary Watches will be conducted only on the SUs and only with an order from a Psychiatrist.
- 2. The order for Precautionary Watch will indicate on Form MH-044, Inmate Status/Precautionary Watch, the:
 - a. Type of personal property the inmate will be permitted to maintain.
 - b. Monitoring frequency required (15 or 30 minutes).
- 3. Inmate placement on Precautionary Watch:
 - a. Correctional officers will:
 - 1) Inspect the crisis cell prior to inmate placement to ensure that no items are available for potential self-harm.
 - 2) Place inmates in the crisis cell. Mental health staff will assist in the placement process if requested. Every effort will be made to ensure inmate dignity, but this may be secondary in situations of potential harm to self or others.
 - b. The inmate will be provided only the personal property listed on ADOC Form MH-044 ordered by the psychiatrist but will minimally include a safety tunic, mattress, and blanket. No inmate will be left unclothed in a crisis cell.

- c. Mental health nursing staff will:
 - 1) Evaluate the medical condition of the inmate (i.e. vital signs and body chart) after placement whenever the inmate's behavior permits.
 - 2) Initiate an ADOC Form MH-044, Inmate Status/Precautionary Watch, for placement outside the inmate's cell door.
 - 3) Initiate documentation of the use of Precautionary Watch procedures on ADOC Form MH-045.
4. Staff monitoring of an inmate on Precautionary Watch:
 - a. Documented monitoring by correctional officers at the intervals ordered by the Psychiatrist will be completed on ADOC Form MH-042.
 - b. A nursing assessment to include the inmate's vital signs will be documented each shift.
 - c. The inmate's ADOC Form MH-032, Treatment Plan will be initiated/revised to reflect the Precautionary Watch status. ADOC Form MH-044 will be updated whenever precautionary measures are modified.
 - d. The inmate's Treatment Coordinator and Psychiatrist will evaluate an inmate on Precautionary Watch no less than once a day on workdays. Mental Health Nurses, with consultation of the on-call Psychiatrist, will provide the daily monitoring on weekends and holidays.
5. Correctional officers will provide food at designated intervals. Liquids and the use of a toilet will be provided once each hour at the inmate's request.
6. Discontinuing Precautionary Watch procedures requires an order from a Psychiatrist documented on Annex E, Physician Orders. This order may be a verbal order after documented consultation between the Psychiatrist and Mental Health Nurse.
7. Mental Health Nurses will complete documentation of the use of Precautionary Watch status on ADOC Form MH-044 and Form MH-045 when the watch is discontinued.
8. Documentation required when inmate is on Precautionary Watch:

- a. A description of inmate's behavior and rationale for initiating Precautionary Watch procedures on ADOC Form MH-025, Psychiatric Progress Notes, will be completed by Psychiatrist.
 - b. An order for initiation of Precautionary Watch procedures in Annex E, Physician Orders.
 - c. Completion of an Incident Report by Correctional Officers regarding the initiation of Precautionary Watch procedures.
 - d. Documentation of nursing assessments after placement on Precautionary Watch and each shift thereafter on ADOC Form MH-040 of inmate's medical record.
 - e. Completed ADOC Form MH-042 documenting Correctional Officer monitoring will be filed in the mental health section of inmate's medical record.
 - f. Documentation of ADOC Form MH-032 and ADOC Form MH-034 will be filed after Annex C, Problem List, of inmate's medical record.
 - g. Documentation of daily follow-up by the Psychiatrist on ADOC Form MH-025 and the inmate's Treatment Coordinator on ADOC Form MH-040 in the inmate's medical record
 - h. Order from Psychiatrist discontinuing Precautionary Watch procedures documented on Annex E, Physician Orders and providing plan for follow-up on ADOC Form MH-032.
 - i. Completed ADOC Form MH-045
9. Monitoring the use of mental health watch procedures:
- a. The institution's Supervising Psychologist will submit the following documents to the Mental Health Director each month:
 - 1) ADOC Form MH-044
 - 2) ADOC Form MH-045
 - b. The Mental Health Director will provide monthly summary statistics regarding the use of mental health watches throughout the system to the ADOC Director of Treatment by the 5th of each month.
 - c. Monitoring the use of mental health watches in accordance with established procedures is a component of the quality improvement program.

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 MH-025, Psychiatric Progress Notes
- B. ADOC Form MH-032, Treatment Plan
- C. ADOC Form MH-034, Treatment Plan Review
- D. ADOC Form MH-040, Progress Notes
- E. ADOC Form MH-042, Mental Health Watch/Restraint Procedures
- F. ADOC Form MH-044, Inmate Status/Precautionary Watch
- G. ADOC Form MH-045, Crisis Cell Utilization
- H. Annex C, Problem List
- I. Annex E, Physician Orders

VIII. SUPERCEDES

This AR supercedes AR 470 dated December 2, 2001.

IX. PERFORMANCE

This AR is published under the authority of:

- A. The Bradley Agreement of August 8, 2000
- B. The National Commission on Correctional Health Care: Standards for Health Services in Prisons, 2003. (P-I-01)
- C. Department of Mental Health and Mental Retardation Statutory Authority: The Code of Alabama, 1975, Section 22-50-11



Donal Campbell, Commissioner