

State of Alabama Alabama Department of Corrections



301 S. Ripley Street P. O. Box 301501 Montgomery, AL 36130

March 21, 2005

ADMINISTRATIVE REGULATION NUMBER 635

OPR: TREATMENT

MENTAL HEALTH DOCUMENTATION FORMAT AND CHARTING GUIDELINES

I. GENERAL

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes policies, procedures, and responsibilities for consistently documenting the provision of mental health services.

II. POLICY

ADOC and contract mental health staff will document mental health contacts and changes in the inmate's functioning in the format and frequency established by ADOC. All documentation of mental health services provided to inmates will be filed in the inmate's medical record.

III. <u>DEFINITION(S) AND ACRONYM(S)</u>

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

AIMS Testing

Intensive Psychiatric Stabilization Unit (SU)

Medication Administration Record (MAR)

Progress Notes

Quality Improvement Program

Residential Treatment Unit (RTU)

Serious Mental Illness (SMI)

Segregation

IV. RESPONSIBILITIES

- A. The ADOC Director of Treatment will establish policies and procedures for accurate, timely documentation of services performed by mental health providers.
- B. All staff will document mental health contacts in the consistency and frequency established by this ADOC AR.

V. PROCEDURES

- A. ADOC Psychologists/Psychological Associates and contract mental health staff will:
 - 1. Receive training in confidentiality and security of medical records.
 - 2. Document all inmate mental health contacts in the inmate's medical record.
- B. A cooperative relationship between medical and mental health staff in sharing access to the medical records is expected.
- C. The inmate's medical record will:
 - 1. Contain documentation for all levels of mental health services within the ADOC
 - 2. Be maintained in a single location
- D. A separate file will not be initiated when an inmate is housed on an Intensive Psychiatric Stabilization Unit (SU) or Residential Treatment Unit (RTU). However, when an inmate's medical record is utilized/maintained on the SU or RTU, it will be managed with the same security afforded medical records maintained in the medical units.
- E. An additional medical record will be generated when the cover of the medical record is no longer able to accommodate additional paperwork. The most recent medical record will include:
 - 1. ADOC Form MH-011, Reception Mental Health Screening Evaluation
 - 2. Any reception mental health evaluation
 - 3. The most recent ADOC Form MH-018, Psychiatric Evaluation
 - 4. The most recent ADOC Form MH-032, Treatment Plan, or ADOC Form MH-034, Treatment Plan Review
 - 5. ADOC Form MH-040, Progress Notes
 - 6. Any documentation from the previous month
- F. Staff will review all medical records of an inmate when completing an evaluation of the inmate.

- G. Mental health documentation will be filed in reverse chronological order in the sections indicated (Refer to Annex E, Inmate Medical Record Filing Format).
 - 1. Mental health treatment planning status and updates will be filed in reverse chronological order under the "Problem List" section on the left side of the medical record.
 - 2. The reception mental health screening, reception mental health evaluation, inmate orientation to mental health services, and Authorizations for Inmate Release of ADOC Mental Health information will be filed under the mental health treatment plans section on the left side of the medical record.
 - 3. Physician orders will be filed in reverse chronological order on the right side of the medical record. Informed consents for psychotropic medications will be filed under the "Other" section on the left side of the medical record.
 - 4. Mental health progress notes, evaluations related to segregation placement and the disciplinary process, admission and discharge assessments and documentation from the Intensive Psychiatric Stabilization Units and Residential Treatment Units, transfer paperwork and discharge from Taylor Hardin Secure Medical Facility, responses to referrals for services, and documentation of medication noncompliance will be filed in reverse chronological order in the "Psychiatric & Psychological Reports" section on the left side of the medical record.
 - 5. Documentation verifying inmate monitoring while on watch status or in restraints will be filed in reverse chronological order in the "Other" section on the left side of the medical record. Records of mental health treatment received prior to the inmate's ADOC admission will be filed in the "Other" section under the monitoring forms.
 - 6. Results of AIMS testing will be filed in the "Other" section on the left side of the medical record.
 - 7. Medication administration records will be filed in the "Medication Administration Records" section on the right side of the medical record.

H. ADOC Form 40, Progress Notes:

- 1. Will be completed for an individual contact with an inmate or when there is a change in an inmate's functioning.
- 2. Will be in SOAP formatting (<u>Subjective</u>, <u>Objective</u>, <u>Assessment</u>, <u>Plan</u>). The "P" (Plan) and:
 - a. Should reference the date for next appointment and/or the follow-up to be provided

- b. Does not replace the need for an individual treatment plan for inmates with serious mental illness
- c. Will relate to specific problems identified on the inmate's treatment plan, whenever possible/applicable
- I. Progress notes indicating status change as transfers and assignment of treatment coordinators are not required to be in the SOAP format.
- J. All inmate contacts should be documented the day the contact occurred. If a dictated note or form is to be provided at a later time, a notation that briefly summarizes relevant information and the phrase "dictated note/form will follow" is sufficient.
- K. All mental health documentation must be legible and contain the:
 - 1. Date
 - 2. Time of day
 - 3. Signature of the writer
- L. The frequency and specific requirements of mental health documentation for the various mental health assessments and interventions are indicated within ADOC Mental Health Services ARs. Staff will be familiar with and comply with established standards.
- M. At a minimum, documentation of on-going mental health services being provided to an inmate with serious mental illness will include:
 - 1. ADOC Form MH-032, Treatment Plan, and ADOC Form MH-034, Treatment Plan Review, that are updated no less than every six months.
 - 2 Treatment coordinator's follow-up, no less than monthly.
 - 4. Psychiatric-review no less than every ninety days.
 - 5. Medication Administration Records with documentation of intervention for non-compliance, if applicable.
 - 6. AIMS testing no less than every six months when prescribed an anti-psychotic medication.
 - 7. Results of laboratory testing for specific medications.
 - 8. Responses to inmate self-referrals, if applicable.
 - 9. Crisis intervention documentation, if applicable.

- 10. ADOC Form MH-041, Mental Health Consultation to the Disciplinary Process, if applicable.
- 11. ADOC Form MH-039, Review of Segregation Inmates, if applicable.
- 12. A note indicating the inmate's beginning and completing of group programming.
- N. The Mental Health Quality Improvement Program will include monthly audits of randomly selected inmate medical records to assess the quality and consistency of documentation practices.

VI. <u>DISPOSITION</u>

Refer to AR 601, Mental Health Forms and Disposition

VII. FORMS

Refer to AR 601, Mental Health Forms and Disposition:

- A. ADOC Form MH-011, Reception Mental Health Evaluation
- B. ADOC Form MH-018, Psychiatric Evaluation
- C. ADOC Form MH-032 Treatment Plan
- D. ADOC Form MH-034 Treatment Plan Review
- E. ADOC Form MH-039, Review of Segregation Inmates
- F. ADOC Form MH-040, Progress Notes
- G. ADOC Form MH-041, Mental Health Consultation to the Disciplinary Process

VIII. SUPERCEDES

This AR supercedes AR 475 dated June 4, 2002.

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