

HOUSE No. 1276

The Commonwealth of Massachusetts

In the Year Two Thousand Nine

An Act relative to confinement conditions and treatment of prisoners with mental illness..

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 1 of chapter 127 of the General Laws, as appearing in the 2006
2 Official Edition, is hereby amended by inserting after the definition of “Commissioner” the
3 following definition: -

4 “Mental health professional,” a psychiatrist, psychologist, licensed clinical social worker
5 (LICSW) or licensed mental health counselor (LMHC) who is licensed to practice in the
6 commonwealth pursuant to chapter one hundred and twelve.

7 SECTION 2. Said section 1 of said chapter 127, as so appearing , is hereby further
8 amended by inserting after the definition of “Parole board” the following definition: -

9 “Residential treatment unit,” a therapeutic housing unit within a correctional facility that
10 is operated by the department and supervised by the department of mental health for the purpose
11 of providing treatment and rehabilitation for prisoners.

12 SECTION 3. Section 39 of said chapter 127, as so appearing, is hereby amended by
13 striking out the first paragraph and inserting in place thereof the following paragraph:-

14 Except as provided in section 39A of this chapter, at the request of the superintendent of
15 any correctional institution of the commonwealth, the commissioner may authorize the transfer,
16 for such period as s/he may determine, to a segregated unit within any correctional institution of
17 the commonwealth, of any inmate whose continued retention in the general institution population
18 is detrimental to the program of the institution.

19 SECTION 4. Said chapter 127, as so appearing, is hereby amended by inserting after
20 section 39 the following section:-

21 Section 39A. Diversion to residential treatment units

22 (a) When an inmate is confined to a segregated unit, the superintendent shall arrange for a
23 mental health professional to assess the mental health of the inmate and to review the inmate's
24 mental health record within twenty-four hours. Inmates remaining in such confinement shall be
25 reassessed at a minimum of every three days thereafter. Mental health assessments shall be
26 conducted in a confidential manner.

27 (b) As part of all mental health assessments conducted pursuant to paragraph (a) of this
28 section, mental health professionals shall identify for diversion or removal from such segregated
29 unit any inmate who meets the criteria set forth in paragraph (c) of this section. Inmates
30 identified for diversion or removal from a segregated unit shall, within seventy-two hours of the
31 assessment, be diverted or removed from such unit and placed in a residential treatment unit or
32 provided with clinically appropriate treatment in general population. While awaiting transfer,
33 the mental health status of such inmates shall be closely monitored.

34 (c) Inmates who have been designated for transfer to a segregated unit as provided in
35 section 39 of this chapter and who meet at least one of the following criteria shall be diverted or
36 removed from segregation as provided in paragraph (b) of this section. These criteria are:

37 (1) Inmates who are diagnosed with, are currently under treatment for, or currently
38 display symptoms of one or more of the following disorders described in the most recent edition
39 of the diagnostic and statistical manual of mental disorders:

40 A. schizophrenia and other psychotic disorders,

41 B. major depressive disorders, current or recurrent,

42 C. bipolar disorders, all types,

43 D. cognitive disorders, specifically delirium, dementia and amnesiac disorder,

44 E. personality or anxiety disorders, including post-traumatic stress disorder, that result in
45 significant functional impairment or significant or chronic self-injury;

46 (2) inmates diagnosed with mental retardation;

47 (3) inmates diagnosed with traumatic brain injury;

48 (4) inmates determined to be at risk of suicide including inmates who have engaged in
49 behavior that evidences serious suicidal risk including self-mutilation; or

50 (5) inmates who have otherwise substantially deteriorated mentally or emotionally while
51 confined in segregation where diversion or removal is deemed to be clinically appropriate by a
52 mental health professional.

53 SECTION 5. Said chapter 127, as so appearing, is hereby further amended by inserting
54 after section 17 the following section:-

55 Section 17A. Establishment of mental health treatment programs inside correctional
56 facilities

57 (a) The commissioner, in cooperation with the commissioner of mental

58 health, shall establish in correctional facilities such programs, including but not limited to
59 residential treatment units, as are necessary for the treatment of mentally ill inmates confined
60 therein who are in need of psychiatric services but who do not require hospitalization for the
61 treatment of mental illness, as determined by identification by a mental health professional and
62 referenced in Section 3. Such inmates shall receive therapy and programming in settings that are
63 appropriate to their clinical needs while maintaining the safety and security of the facility. The
64 Commissioner of the Department of Corrections shall establish the appropriate number of
65 residential treatment units (RTUs), in consultation with the Commissioner of the Department of
66 Mental Health, at each correctional facility operated by the Department of Corrections.

67 (b) All correctional staff who work in residential treatment units shall be screened and
68 shall receive at a minimum forty hours of mental health training, plus twelve hours of annual
69 training. In addition to the training requirement provided in this paragraph, all other correctional
70 officers employed by the department shall be given eight hours of annual mental health training.
71 Such training shall include information about the types and symptoms of mental illnesses, the
72 goals of mental health treatment, medication and side effects, co-occurring disorders, and
73 training in how to effectively and safely manage inmates with mental illness.