**SHU Exclusion Law**  Effective date – July 1, 2011. DOCCS and OMH will be responsible for continuing to provide improved access to mental health treatment. Inmates designated SMI should be offered a heightened level of care in residential mental health settings when doing so will not compromise the safety of inmates or other persons or the security of the facility.

**RMHTU – Residential Mental Health Treatment Unit**
Residential mental health treatment units include BHU, RMHU, ICP and IICP. Inmates placed in RMHTU’s should be offered at least four (4) hours a day of structured out-of-cell therapeutic programming and/or mental health treatments, except weekends and holidays, in addition to exercise, and may be provided with additional out-of-cell activities consistent with mental health needs.

**NYSCQCAPD – New York State Commission on Quality of Care and Advocacy for Persons with Disabilities**
The NYSCQCAPD is responsible for monitoring the quality of mental health care provided to inmates under the SHU Exclusion Law.

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**New York State Department of Corrections and Community Supervision**
**Bureau of Mental Health**
**Mental Health Program Descriptions – 7/5/11**

**Special Programs Descriptions**
NYSDOCCS partners with the NYSOMH in providing special programs along a continuum of care for inmates with a mental illness. Inmates with other special needs may also be eligible for special programs and services. This brochure provides a brief description of these program options. If you have questions or require more information please call the NYSDOCCS Bureau of Mental Health (518) 408-0281.

**NYSDOCCS Mission Statement**
Enhance public safety by providing appropriate treatment services, in safe and secure facilities, that address the needs of all inmates so they can return to their communities better prepared to lead successful and crime-free lives.

**Mental Health Programs**

**BHU - BEHAVIORAL HEALTH UNIT**
The BHU is a program that provides services to a target population of inmate-patients currently diagnosed as Seriously Mentally Ill (SMI), who have demonstrated a history of treatment resistance and poor custodial adjustment/behavior, and have Special Housing Unit (SHU) sanctions. This program has an emphasis on cognitive and behavioral interventions. The BHU is located at Great Meadow (Phase 1, 38 beds where 2 hours of out-of-cell therapeutic programming is offered) and Sullivan (Phases 2 & 3, 64 beds where 4 hours of out-of-cell therapeutic programming is offered).

**CNYPC - CENTRAL NEW YORK PSYCHIATRIC CENTER**
CNYPC provides inpatient psychiatric care and treatment for inmate-patients who are mentally ill and a danger to themselves or others. CNYPC is a 208-bed hospital operated by the New York State Office of Mental Health and is located in Marcy, NY. All CNYPC Admissions originate from a Satellite Unit.

**CORP - COMMUNITY ORIENTATION & RE-ENTRY PROGRAM**
CORP provides intensive mental health discharge planning services to OMH level 1 or 2 inmate-patients who are returning to the New York City area. Program services are provided by OMH staff. Located at Sing Sing CF, CORP is a 31-bed unit for inmate-patients with 90 days or less to Conditional Release (CR) date or Maximum Expiration (ME) date.

**ICP - INTERMEDIATE CARE PROGRAM**
The ICP is a residential mental health program for SMI inmate-patients jointly operated by DOCCS and OMH. The ICP is a therapeutic community which provides rehabilitative services to inmate-patients who are unable to function in general population because of their mental illness. The goal of the program is to improve the inmate-patient’s ability to function through programming and treatment so that they may return to general population. Referrals are reviewed by an ICP Admission Committee comprised of DOCCS and OMH staff. Length of stay varies. The following facilities are OMH Level 1 with ICPs: Albion, Attica, Auburn, Bedford Hills, Clinton, Elmira, Fishkill, Five Points, Great Meadow, Green Haven, Mid-State, Sing Sing, and Sullivan.

**IICP - INTENSIVE INTERMEDIATE CARE PROGRAM**
The IICP is also a residential mental health program for SMI inmate-patients with long-term keeplock and/or inmate-patients who require alternate placement from other ICPs due to poor disciplinary/poor adjustment in correctional facilities. Staffing and programming are similar to other ICPs with additional groups centering on increasing an inmate-patient’s behavioral control and future adjustment to the correctional environment. The IICP is a 38 bed unit located at the Wende Correctional Facility.
RCTP - RESIDENTIAL CRISIS TREATMENT PROGRAM

The goal of the RCTP is to evaluate and treat inmate-patients in need of short-term crisis mental health care. RCTPs have both observation cells and a dorm area for inmate-patients in crisis and in need of intensive treatment and monitoring. Mental Health Satellite Units, which include an RCTP and outpatient services, are located in 12 OMH Level 1 maximum security facilities (Attica, Auburn, Bedford Hills, Clinton, Downstate, Elmira, Five Points, Great Meadow, Green Haven, Sing Sing, Sullivan, and Wende) and 3 OMH Level 1 medium security facilities (Albion, Fishkill, and Mid-State). Services are accessed as outlined in DOCCS Directive 4301.

RMHU - RESIDENTIAL MENTAL HEALTH UNIT

The RMHU was developed by DOCCS and OMH to address the special needs of inmate-patients currently diagnosed with a serious mental illness who, due to their disciplinary status, are serving time in a SHU or Separate Keeplock Unit. The program is designed to meet the mental health and behavioral needs of the inmate-patient while taking into consideration their disciplinary status and safety and security needs of the correctional system. The RMHU provides evaluation, intervention and supportive mental health and correctional rehabilitative services for the inmate-patient participants. The RMHU inmate-patient is offered four hours of specialized out-of-cell therapeutic programming, five days a week. This program is located at Marcy Correctional Facility (100 beds), Five Points C.F. (60 beds) and Attica C.F. (10 beds).

SHU GTP - SPECIAL HOUSING UNIT GROUP THERAPY PROGRAM

The GTP program provides services to inmate-patients who are currently diagnosed with a serious mental illness and are serving a SHU sanction in excess of 30 days. Many of these inmate-patients have unsuccessfully participated in BHU or RMHU. The treatment goal is to enable the inmate-patient to successfully adjust to environmental demands and to ultimately be reintegrated into a general population or other specialized program. This program has an emphasis on psychiatric and behavioral interventions. GTP’s are located at Elmira and Wende Correctional Facilities. Each site has 6 therapeutic cubicles and offers 2 hours a day, 5 days a week of out-of-cell therapeutic programming.

TBU - THERAPEUTIC BEHAVIORAL UNIT

The TBU is a program for female inmate-patients serving SHU sanctions who have a history of serious mental illness and/or poor custodial adjustment. This program is similar to the BHU and RMHU for male inmate-patients. The TBU has 32 beds and is located at Bedford Hills Correctional Facility and offers 4 hours a day, 5 days a week of out-of-cell therapeutic programming.

TrICP - TRANSITIONAL INTERMEDIATE CARE PROGRAM

The TrICP provides OMH case management services to Seriously Mentally Ill (SMI) inmate-patients in a general population location. In addition to receiving mental health outpatient services, these inmate-patients participate in two groups each week aimed at helping their adjustment to the regular prison environment. TrICPs are located at: Attica, Auburn, Bedford Hills, Clinton, Elmira, Fishkill, Great Meadow, Green Haven, Sing Sing, and Wende.

Understanding Mental Health Service Levels

Correctional facilities are classified as Mental Health Service Levels 1, 2, 3, 4, or 6 depending on the amount of mental health services and resources available at the facility.

- Level 1: OMH staff is assigned on a full-time basis and able to provide treatment to inmate-patients with a major mental disorder. The array of available specialized services include: residential crisis treatment, residential/day treatment, case management, medication monitoring by psychiatric nursing staff, and potential commitment to the Central New York Psychiatric Center;

- Level 2: OMH staff is assigned on a full-time basis and able to provide treatment to inmate-patients with a major mental disorder, but such disorder is not as acute as that of inmate-patients who require placement at a Level 1 facility;

- Level 3: OMH staff is assigned on a part-time basis and able to provide treatment and medication to inmate-patients who either have a moderate mental disorder, or who are in remission from a disorder, and who are determined by staff of the Office of Mental Health to be able to function adequately in the facility with such level of staffing;

- Level 4: OMH staff is assigned on a part-time basis and able to provide treatment to inmate-patients who may require limited intervention, excluding psychiatric medications;

- Level 5: No assigned staff from the Office of Mental Health;

- Level 6: Upon reception into the DOCCS system and throughout incarceration as necessary, inmates can be referred and assessed by OMH staff to determine the amount of mental health services required and are then assigned to facilities where that level of service is available.

Diagnostic Criteria for Seriously Mentally Ill (SMI), per the Private Settlement Agreement (PSA) and SHU Exclusion Law

- Inmate determined by OMH to have a current diagnosis or a recent significant history of any of the following types of Diagnostic and Statistical Manual IV (DSM-IV) Axis I diagnosis:
  - Schizophrenia (all sub-types)
  - Delusional Disorder
  - Schizoaffective Disorder
  - Brief Psychotic Disorder
  - Psychotic Disorder Not Otherwise Specified
  - Major Depressive Disorders
  - Bipolar Disorder I and II
  - Substance-Induced Psychotic Disorder (excluding intoxication and withdrawal)

- Actively suicidal or recent, serious suicide attempt.
- Diagnosed with serious mental illness, organic brain syndrome or a severe personality disorder which is manifested in significant functional impairment such as acts of self-harm or other behaviors that has a serious adverse effect on life or on mental or physical health.

JCMC - JOINT CASE MANAGEMENT COMMITTEE

The JCMC is a committee consisting of facility DOCCS and OMH staff and is responsible for reviewing, monitoring, and coordinating the behavior and treatment plans for all inmates in SHU who are on the OMH mental health caseload. The JCMC meets at least once every two weeks and is also responsible for making recommendations to the Superintendent for time cuts.

JCORC - JOINT CENTRAL OFFICE REVIEW COMMITTEE

The JCORC consists of high level Executive staff from both DOCCS and OMH who have been designated by their respective Commissioners. The JCORC reviews the aggregation of SHU sentences of inmate-patients who are seriously mentally ill and provides oversight for the provisions of the Private Settlement Agreement. The JCORC reviews two facility JCMC meetings each month through the use of video-teleconferencing.

PSA - Private Settlement Agreement

DOCCS and OMH entered into a private settlement agreement with Disabilities Advocates, Inc. (DAI) on 4/27/07. The settlement agreement attempts to balance the need for treatment of inmate-patients’ mental illness with the need to maintain safety in correctional facilities, particularly in relation to SMI inmate-patients with disciplinary issues. NYSDOCCS and NYSOMH enhanced their commitment to provide a heightened level of care for inmates with a mental illness.