

A Basic Education on BOP Mental Health Issues, Programs & Treatment

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BOP Psychology Basics

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Pre-trial Issues-

Medication (formulary) [2020_winter_formulary_part_2.pdf \(bop.gov\)](#)

Studies – 18 USC 4241(b&d), 4242, 4243(b)-Mental competency/insanity, etc.

Resource: [Program Statement 7331.04, Pretrial Inmates \(bop.gov\)](#) Pg.14, Par. 21

“a. Staff shall provide the pretrial inmate with the same level of basic medical (including dental), psychiatric, and psychological care provided to convicted inmates.]”

“[b. Staff shall advise the court, through the U.S. Marshal, of medication the pretrial inmate receives which may alter the inmate's courtroom behavior.]”

Typical medium staffing –(FCI w/RDAP), 4 clinicians

** Caveat- Resources from BOP website as of 1/23/2022

Continued

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- .. PSIQ (Psychology Services Intake Questionnaire)
- .. [bp_a0519.pdf \(bop.gov\)](#) (form can be modified locally)
 - ▣ Electronic Data bases- SENTRY/PDS/BEMR

 - ▣ Discovery, Records request & central file issues
 - ▣ *“An inmate seeking review and/or copies of his/her health records must complete an Inmate Request to Staff (BP-A0148) in order to review or receive copies of the record. The BP-A0148 will be addressed to the HSA or his/her designee.”*
 - ▣ Resource: [6090_004.pdf \(bop.gov\)](#)

 - ▣ “Psyc Alert” –SENTRY Assignment Resource: [5324_007.pdf \(bop.gov\)](#)
 - ▣ Mental Health Advanced Directives
- ..

Designations, Programs & Treatment Expectations

Designation-

Psyc. Care Levels (1-4) –Both Physical and Mental Health levels

Resource: [care_level_classification_guide.pdf \(bop.gov\)](#)

Classification –Don't assume a classification –Recommendation?

Resource: [5100_008cn.pdf \(bop.gov\)](#)

Programs –Evolving w/FSA Currently two directories, 2017 & 7/2021

Resource: [5330.11.pdf \(bop.gov\)](#)

Psychology Department- [5310_017.pdf \(bop.gov\)](#)

✧ Core policies, expectations & realities, Department staffing

Specialized MH Related Programs

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- Skills Program (Residential, Intellectual Disabilities)
- FIT (Residential, Substance Abuse, Mental Illness, Trauma, Female)
- Stages Program (Residential, Serious Mental Illness, Personality Disorder)
- Resolve Program (CBT, Psych Disorder, Trauma)
- Challenge Program (Residential, Male, Substance Abuse, Mental Illness)
- Sex Offender Treatment (Residential, Non-Residential)
- Mental Health Stepdown Program (Intermediate Care, Mental Illness)

Directories: [Directory of National Programs \(bop.gov\)](#)- Discontinued

[fsa_program_guide_2107.pdf \(bop.gov\)](#)

New: Secure Mental Health Units (ALP/ATL), both have “Transitional Care Units”

Constructing a “Special Administrative Unit” – (ie: SHU w/clinicians)

Tip-SPARC (13)-Refusals (Specialized Pris. Assessment Reduction Criminality) –

NO FSA time credit if (R)-refusal in any area

Disciplinary

541.6 **Mentally ill inmates**. If it appears you are mentally ill at any stage of the discipline process, you will be examined by mental health staff. (a) Competency to Participate in Disciplinary Proceedings. If evidence indicates that you cannot understand the nature of the disciplinary proceedings, or cannot help in your own defense, disciplinary proceedings may be postponed until you are competent to participate. The Unit Disciplinary Committee or Discipline Hearing Officer will make this decision based on evidence, including evidence presented by mental health staff. (b) Responsibility for Conduct. You will not be disciplined for conduct committed when, as the result of a severe mental disease or defect, you were unable to appreciate the nature and quality, or wrongfulness of the act. The UDC or DHO will make this decision based on evidence, including evidence presented by mental health staff.

** Chapter 3 Quotes above CFR : [5270.90_cn1.pdf \(bop.gov\)](#)

Discipline continued

- A person is not responsible for his/her conduct if, at the time of the conduct, as a result of a severe mental disease or defect, he/she was unable to appreciate the nature and quality or the wrongfulness of his/her acts.
- A person is incompetent if he/she lacks the ability to understand the disciplinary proceedings, or to assist in his/her defense. When a person is determined incompetent, the disciplinary proceedings are postponed until the inmate is able to understand the proceedings and assist in his/her defense. If competency is not restored within a reasonable time, the incident report shows as a finding that the inmate is incompetent.

Forms: [BP_A1058.pdf \(bop.gov\)](#) (Restrictive Housing Eval. Initial)
[BP_A1057.pdf \(bop.gov\)](#) (Restrictive Housing Eval. Review)

Re-entry issues

- People need a BOP physical psyc. clearance to participate in the halfway house/home detention.
- Form: [Form BP-S351.060, Medical/psychological Pre-release Evaluation \(bop.gov\)](#) (Note-DEA Controlled Substances)
- Form: [Form BP-S210.073, Institutional Referral for CCC Placement \(bop.gov\)](#) (Referral for community placement)

- RRC & HD's are private contracts (SOW) and have limited and varying services around the country. General vs specific SOW's

BOP sends a Supervision Release Plan with specific needs

Form: [Form BP-A0522.053, Supervision Release Plan \(bop.gov\)](#) (Remarks, Special Conditions sections, etc.)

- Most USPO Districts have a "Senior USPO" that has is a Mental Health Specialist that supervises cases with mental health issues.

Resource Links

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Additional Program Statement resources

Psychology Services Manual, Program Statement 5310.17;

Forensic and Other Mental Health Evaluations, Program Statement 5070.12;

Treatment and Care of Inmates with Mental Illness, Program Statement 5310.16;

Psychiatric Evaluation and Treatment, Program Statement 6010.03;

Psychiatric Services, Program Statement 6340.04.

Non-Program Statement resource links:

[Pharmacological Management of Schizophrenia \(bop.gov\)](#)

[Management of Bipolar Disorder \(bop.gov\)](#)

[adult_adhd_cd.pdf \(bop.gov\)](#)

[community_rel_planning_guidelines_for_social_work.pdf \(bop.gov\)](#)