17: UNDERSTANDING THE ROLES OF CORRECTIONAL OFFICERS AND MENTAL HEALTH STAFF

Time:	30 min.
Format:	Lecture, discussion
Materials:	PowerPoint, Handout: "Roles in Correctional Mental Health Care," flip chart and markers
Competencies:	 Describe the differing roles and missions of correctional officers and mental health staff in responding to incarcerated people with mental disorders.
	 Value benefits of correctional officers and mental health staff working collaboratively to address mental health issues of incarcerated people.

Description

This module supports a clear understanding of the roles of mental health staff and correctional officers. Through lecture and discussion, participants will explore the benefits of collaboration between these two groups.

Before Training

Customize this module based upon the particular roles and policies at the facility. Options include inviting mental health professionals as guest speakers or as panelists to discuss misconceptions around roles and how COs and mental health staff can work together.

Print out enough copies of the handout "Roles in Correctional Mental Health Care" for every participant to have one.

During Training

Roles and Missions of Correctional and Mental Health Staff



Roles and Missions of

Mental Health Staff

Set Up

Begin by saying:

To effectively address mental health disorders of incarcerated people, both correctional security staff and clinical mental health staff must work cooperatively. Because the correctional setting is intended to serve multiple functions, including those

that are punitive, protective, and rehabilitative, these goals may sometimes conflict with other functions (Dvoskin & Spiers, 2004).

Correctional officers and mental health staff, as part of this broader multi-functioned system, have distinct professional backgrounds, cultures, and missions. Recognizing this is an essential step toward collaborative work (Appelbaum et al., 2001).

Mental Health Staff

Lecture

Present lecture:

Who are the mental health staff in corrections, and what do they do?

Psychologists are mental health staff commonly employed in correctional facilities. However, there are often very few psychologists for very many incarcerated persons. Psychologists' duties may include administrative tasks, crisis intervention, individual and group treatment, psychological evaluation for courts and classification purposes, referral for further psychiatric evaluation, and training of other staff. In some jurisdictions, psychologists



may prescribe medication for mental health disorders, but in other jurisdictions, this is the role of medical staff.

Nurses often are on the front lines of contact with incarcerated people, with duties including dispensing medications, educating patients, and identifying symptoms of mental disorders. They may also contribute to management of inpatient psychiatric units, providing daily monitoring of patients, assessing suicidality, providing individual and group treatment, and monitoring medications.

Social workers are in roles ranging from direct care to serving as a link to outside agencies on behalf of incarcerated persons. Their direct care can include individual and group treatment, assistance with discharge planning, substance abuse treatment, recommendations for vocational and educational programming, and advocacy for persons who are incarcerated (Temporini, 2010).

All of these staff may play a role in mental health services at correctional facilities.

Role of Correctional Officers in Addressing Mental Health

Lecture

Present lecture:

How are COs connected to the mental health of those who are incarcerated?

Because correctional officers have more daily contact with incarcerated people than do mental health staff and may be at the facility on days/times when mental health staff are not, correctional officers can help by identifying, addressing, or reporting mental health issues witnessed during this daily contact. Because of their proximity to behavior of those incarcerated, correctional officers can in some ways provide a **proactive response** to



potential problems rather than a reactive response of simply calling in mental health staff once things have escalated (Lazaretto-Green et al., 2011).

For instance, correctional officers may:

- Help diffuse potential problems before they develop into larger crises. Correctional officers are more likely than mental health staff to be present when potential disturbances begin to arise, and officers can help by listening to concerns of incarcerated individuals, helping to calm or redirect individuals, and/or provide instructions on ways to avoid similar problems in the future (e.g., "Stay away from him if he irritates you"; Dvoskin & Spiers, 2004).
- Help identify potential mental health issues. Correctional officers are sometimes the first to observe significant changes in an incarcerated person's routine or behavior. They can alert mental health staff if they notice an individual's behavior to be bizarre or disruptive, or if they notice deterioration in self-care, aggression, or irritability.
- Keep an eye on incarcerated people who are at increased risk. Mental health staff may alert correctional officers to pay special attention to individuals who are noncompliant with treatments or who may experience personal or legal setbacks.
- Report if an individual displays warning signs of suicidality. For instance, an officer might inform mental health staff if he/she notices an individual becoming increasingly depressed or giving away possessions. The officer can be alert to such issues during high risk times or in high risk places, such as after denial of parole or in segregation cells at night or on weekends.



 Help instruct a person who is functionally impaired (has problems in daily living) using prompts or resources that assist the person in meeting the demands of the correctional environment. When an incarcerated person's mental health or



impairment prevents him/her from understanding or carrying out a task, the officer might assist by breaking instructions down into simpler steps, having the individual watch another person demonstrate the task, and setting achievable benchmarks that can be used as points of encouragement for the incarcerated person.

- Encourage compliance with mental health treatment. This might include encouraging attendance at mental health appointments or alerting mental health staff when an incarcerated person's routines or other factors interfere with treatment needs (e.g., the individual falls asleep before nightly medication is taken).
- Reinforce boundaries for an individual's behavior. This might also include the officer underscoring boundaries and consequences regarding negative behaviors, while using appropriate flexibility in managing incarcerated people with mental disorders; ideally, officers and mental health staff can communicate with one another to determine the level of enforcement versus flexibility that is feasible given security concerns as well as the individual's level of impairment. This communication is especially important in addressing security and clinical concerns if any special privileges may be granted to incarcerated people with mental disorders (Appelbaum et al., 2001)

The Roles of Correctional Officers and Mental Health Staff

Discussion

Give participants one copy each of the handout "Roles in Correctional Mental Health Care."

Say:

Let's have a look at this chart and discuss how roles contribute to caring for mental health concerns in correctional facilities.

Review the chart together.

Facilitate the discussion with the following questions:

- What stands out to you about responsibilities in the chart?
- In your workplace, do you have any other kinds of mental health workers? Describe what they do—or what you think they do.
- At your workplace, do you have much contact with mental health staff?
- Can you identify a staff member at your workplace to whom you could bring concerns?
- What could you do at work to strengthen cooperation between the two groups of staff? Are there things administration could do?

Conclude:

Mental health workers and correctional officers are both crucial in addressing and maintaining positive mental health in people who are incarcerated.





Sources

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