


KANSAS DEPARTMENT OF CORRECTIONS

 Kansas Department of Corrections	INTERNAL MANAGEMENT POLICY AND PROCEDURE	SECTION NUMBER 10-118A	PAGE NUMBER 1 of 7
		SUBJECT: PROGRAMS AND SERVICES: Administration of Psychotropic Medication	
Approved By: <div style="text-align: right;">Secretary of Corrections</div>		Original Date Issued: 09-29-15	
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POLICY STATEMENT

The decision to administer psychotropic medication is a medical one and psychotropic medication shall never be used for disciplinary reasons or mere behavior control. Psychotropic medication shall only be involuntarily administered at designated KDOC facilities, in compliance with applicable federal and State laws and regulations and only on the order of a physician, psychiatrist, or other authorized individual with designated privileges. (ACI 4-4401, NCCHC P-I-02)

DEFINITIONS

Departmental Clinical Health Authority: The physician Regional Medical Director of the agency or organization responsible for the provision of health care services for the KDOC. This position has full clinical autonomy and responsibility for clinical health care issues within the KDOC.

Gravely Disabled: A condition in which the individual is in danger of serious physical harm resulting from the individual's failure to provide for essential human needs of health or safety as a result of a mental disorder.

Involuntary Medication Review Committee: A committee established to conduct due process hearings to review psychiatric orders for involuntary administration of psychotropic medication.

Likelihood of Serious Harm: Evidence of substantial risk of physical harm to self or others, or to the property of others.

Mental Disorder: Any organic mental or emotional impairment that has an adverse effect on an individual's cognitive volitional functioning.

Psychiatric Emergency: A situation in which the offender poses an imminent threat of serious physical harm to self or others due to a mental disorder.

Psychiatric Order: A medical order issued by a board certified psychiatrist providing psychiatric services for the KDOC.

Regional Behavioral Health Director: A psychologist that coordinates behavioral health care statewide.

Regional Psychiatric Director: Responsible for the clinical supervision of all facility psychiatrists. The Regional Psychiatrist is supervised clinically by the Departmental Clinical Health Authority and administratively by the Regional Vice President and or his designee.

Severe Deterioration in Routine Functioning: Evidence of repeated and escalating loss of cognitive or volitional control over his or her actions by an offender who is failing to provide for his or her own essential health and safety needs.

PROCEDURES

I. Order for Involuntary Administration of Psychotropic Medication

- A. The Regional Psychiatric Director shall develop procedures prescribing the steps required to evaluate the need for involuntary administration of psychotropic medication and the notifications required to affect the order.
 - 1. A psychiatric order for involuntary administration of psychotropic medication and the clinical evidence to support that order shall be obtained and fully documented in the offender's health record.
- B. Involuntary Administration of Psychotropic Medication to an Offender
 - 1. After a physical examination of an offender has been performed by the health provider and a determination is made that the offender poses a clear and immediate threat to self or others, and, that less restrictive or intrusive measures have proven to be inadequate or clinically inappropriate, the physician or authorized health provider may order the involuntary administration of psychotropic drugs.
 - a. The order shall be specific as to the duration of the regimen, instructions as to when, where and how the procedures may be used, and, treatment plan goals for less restrictive treatment alternatives to be initiated as soon as possible.
 - 2. A behavioral health professional shall discuss with the offender the reasons that psychotropic medication is ordered and address any concerns the offender may have about complying with the psychiatric order for the medication.
- C. Right of Refusal
 - 1. An offender who is not in a behavior health crisis may refuse to consent to the administration of psychotropic medication.
 - 2. Except in psychiatric emergency situations or when an offender is declared to be in a behavioral health crisis, such medication shall not be administered to the offender involuntarily until a due process hearing to review the psychiatric orders for the medication and the offender's condition has been completed by the Involuntary Medication Review Committee.

II. Scheduling of a Due Process Hearing

- A. The Involuntary Medication Review Committee shall conduct a due process hearing to review the psychiatric order for involuntary administration of psychotropic medication.
 - 1. Upon completion of the order for involuntary administration of psychotropic medication, the ordering psychiatrist shall request the Chairperson of the Involuntary Medication Review Committee to schedule a due process hearing. (Attachment A)
- B. The time between the order of a physician or psychiatrist authorizing involuntary administration of psychotropic medication and the due process hearing shall not exceed three (3) calendar days.

III. Involuntary Medication Review Committee

- A. Except for the involuntary administration of psychotropic medication during a psychiatric emergency pursuant to IMPP 12-113, involuntary administration of psychotropic medication shall occur only at:

1. The Hutchinson Correctional Facility - Central Unit (HCF-CU);
 2. The Lansing Correctional Facility - Central Unit (LCF-CU);
 3. The El Dorado Correctional Facility - Central Unit (EDCF-CU);
 4. The Larned Correctional Mental Health Facility (LCMHF) for male offenders; and,
 5. At the Topeka Correctional Facility (TCF) maximum security unit for female offenders.
- B. An Involuntary Medication Review Committee shall be established at LCMHF, LCF-CU, EDCF-CU, HCF-CU, TCF-CU and TCF-RDU to conduct due process hearings to review psychiatric orders for involuntary administration of psychotropic medication.
1. The committee shall be comprised of two (2) members appointed by the Regional Psychiatric Director or designee.
 - a. Both members shall be physicians.
 - b. At least one member shall be a psychiatrist.
 - c. One member of the committee shall serve as the Chairperson.
 2. Neither of the members of the committee shall have been involved in the prescribing of the psychotropic medications under review, but physicians are not disqualified from sitting on the committee if they have treated or diagnosed the offender in the past.

IV. Qualified Staff Involvement

- A. Members of the Involuntary Medication Review Committee and the staff member assigned to assist the offender during the due process hearing shall be trained in the relevant legal and medical issues regarding the involuntary administration of psychotropic medication.
- B. Only staff trained in the use of crisis intervention techniques shall be utilized to restrain the offender and only qualified medical staff shall administer the medication.

V. Pre-hearing Activities

- A. A member of the unit team shall be assigned by the classification administrator to assist the offender in the due process procedure.
 1. The role of the assisting staff member is to facilitate the offender's understanding of the hearing and his/her participation in the hearing procedure.
- B. The offender and the assisting staff member shall receive written notice (Attachment B, Part I) of the time and place of the hearing at least 24 hours prior to the hearing.
 1. The notification shall include the following:
 - a. The tentative diagnosis; and,
 - b. The reasons that the psychiatrist and other behavioral health services staff believe the medication are necessary.
- C. Prior to the hearing, the offender and assisting staff member may request in writing to the chairperson of the committee that certain staff witnesses be present at the hearing or that specific questions be asked of certain witnesses outside of the hearing.
 1. The request shall be made utilizing Part II of the Involuntary Medication Review Committee's Hearing Notice (Attachment B).

- D. Prior to the hearing, the committee shall conduct any investigation it deems necessary regarding the administration of psychotropic medication to the offender.
 - 1. Any information obtained during an investigation must be presented at the hearing in order to be considered by the committee in reaching its decision.

VI. Due Process Hearing

- A. The due process hearing shall be conducted to determine if:
 - 1. The offender suffers from a mental illness or mental disorder;
 - 2. The medication is in the best interest of the offender for medical reasons; and/or,
 - 3. The offender is gravely disabled or exhibits severe deterioration in routine functioning or poses a likelihood of serious harm to self, others, or the property of others.
- B. The offender shall be present at the hearing unless the offender's attendance poses a substantial risk of serious physical or emotional harm to self or poses a threat to the safety of others.
 - 1. The assisting staff member shall appear at the hearing on the offender's behalf whether the offender is present or not.
- C. The offender and the assisting staff member may present relevant evidence, including statements, testimony of witnesses, and written documents, and may cross-examine staff witnesses who testify at the hearing.
 - 1. The presentation of evidence or questioning of witnesses by the offender or the assisting staff member shall be limited or disallowed only when the chairperson of the committee finds the evidence or questions to be irrelevant, repetitious, or a threat to the safety of those involved in the proceeding or the security of the facility.
 - a. Any denial of a request to make statements, present witnesses or documents, or cross-examine witnesses shall be explained in the Involuntary Medication Review Committee's Hearing Summary (Attachment C).
- D. Any information obtained outside of the hearing shall be available at the hearing.
- E. Although the documentation contained in the health record of the offender shall be reviewed by the committee, the committee may also require that the psychiatrist responsible for the psychiatric order appear in person at the hearing.

VII. Decision of the Committee

- A. The committee shall consider all relevant information and material which has been presented at the hearing in deciding whether to approve the psychiatric order for involuntary administration of the psychotropic medication.
 - 1. Relevant information and material should include available clinical information sufficient to demonstrate a medical necessity for either initiating or continuing the medication, as applicable to the specific case.
- B. A written decision, (Attachment C), shall be prepared by the chairperson of the committee and signed by both members.
 - 1. The written decision shall be signed by both committee members.
 - 2. The written decision shall contain a summary of the hearing, including the following:
 - a. The evidence presented; and,

- b. The reasons for approving or disapproving the involuntary administration of the psychotropic medication.
- C. The original of the written decision shall be placed in the offender's master file, and copies distributed to the following:
1. The offender;
 2. The offender's health record;
 3. The offender's behavioral health file;
 4. The Regional Medical and Psychiatric Director;
 5. The Director of Health Care Services; and,
 6. The Involuntary Medication Review Committee chairperson.

VIII. Right to Appeal

- A. Offenders shall be advised of the right to file a written notice of appeal, within 72 hours of receipt of the committee's decision to approve the involuntary administration of psychotropic medication, to the Regional Psychiatric Director.
- B. Medical staff shall administer the medication as ordered by the psychiatrist and approved by the committee while awaiting the decision of the Regional Psychiatric Director on the appeal. The Regional Psychiatric Director shall remit a written decision within five (5) working days of receipt of the appeal. Offenders may utilize the grievance procedure, per K.A.R. 44-15-101 *et seq.*

IX. Appeal Process

- A. If the committee approves the involuntary administration of the psychotropic medication, the offender shall be advised of the right to appeal the decision to the Regional Psychiatric Director by filing a written notice of appeal within 72 hours of the offender's receipt of the committee's written decision.
 1. If the offender decides to appeal the decision to approve the involuntary administration of the psychotropic medication, the assisting staff member shall promptly forward or assist the offender to forward the offender's written Appeal of the Involuntary Medication Review Committee's Decision (Attachment D), within the 72 hour time limit.
 2. If the offender appeals a decision to approve the involuntary administration of the psychotropic medication, the Regional Psychiatric Director shall review the decision of the Involuntary Medication Review Committee.
 - a. The Regional Psychiatric Director shall, within five (5) working days, either:
 - (1) Approve the continued involuntary administration of the psychotropic medication; or,
 - (2) Order it to cease.
 - b. The decision of the Regional Psychiatric Director shall be in writing.
- B. Medical staff administers the medication as ordered by the psychiatrist and approved by the committee while awaiting the decision of the Regional Psychiatric Director on the appeal.
- C. The original of the written appeal decision shall be placed in the offender's master file, and copies shall be distributed to the following:

1. The offender;
2. The offender's health record;
3. The offender's behavioral health file;
4. The Regional Psychiatric Director; and,
5. The Chairperson of the Involuntary Medication Review Committee.

XIII. Monitoring

- A. Health care staff shall monitor the offender's vital signs as ordered by the physician and/or psychiatrist and, document the process and ensure follow-up treatment or referral is completed.
- B. Once initiated, the involuntary administration of psychotropic medication shall be reviewed by a psychiatrist within 24 hours.
 1. If the order for medication is renewed, it must continue to be reviewed at least every 14 calendar days.
 2. Full documentation supporting the decision to continue to administer the medication shall be provided in the health record and behavioral health file by the psychiatrist.
- C. The offender shall be interviewed by a psychiatrist at least once every thirty (30) days while the offender is receiving psychotropic medication involuntarily.
 1. Full documentation supporting continued medication shall be provided by the psychiatrist in the health record as long as the medication continues.
- D. The Involuntary Medication Review Committee shall conduct a hearing and review the need for continued involuntary medication every six (6) months if the administration of the medication continues or occurs on a regular basis during that time.

XIV. Behavioral Health Procedures

- A. The Regional Psychiatric Director shall develop procedures to implement this policy which shall include, but not be limited to:
 1. Criteria for determining a behavioral health crisis affecting an offender and the procedures to document:
 - a. The physician's order for the involuntary administration of psychotropic medication to include the instructions for time, place and method of administration, and, the less restrictive treatment alternative.
 2. Monitoring and documentation procedures by health care staff, in accordance with Section VIII., above.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or offenders, or an independent duty owed by the Department of Corrections to employees, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

None.

REFERENCES

K.A.R. 44-15-101 et seq.
IMPP 12-113
ACI 4-4401
NCCHC P-I-02

ATTACHMENTS

Attachment	Title of Attachment	Page Total
A	Memorandum Involuntary Psychotropic Medication Administration	1 page
B	Involuntary Medication Review Committee's Hearing Notice/Request for Witnesses	2 pages
C	Involuntary Medication Review Committee's Hearing Summary	2 pages
D	Appeal of Involuntary Medication Review Committee's Decision Memo	1 page

MEMORANDUM

DATE:

Chairperson - Involuntary Review Committee

FROM:

SUBJECT: Involuntary Psychotropic Medication Administration

The following offender was found to be in need of psychotropic medication on an involuntary basis by _____ on _____. The following information is submitted in order for
(Physician's Name) (Date)
for you to schedule the offender for an Involuntary Medication Review Committee due
process hearing in accordance with IMPP 10-118A.

Offender's Name and Number: _____

Diagnosis: _____

Reasons for Involuntary Medication: _____

cc: Health Record
Behavioral Health File
Regional Psychiatric Director

**KANSAS DEPARTMENT OF CORRECTIONS
BEHAVIORAL HEALTH SERVICES**

**INVOLUNTARY MEDICATION REVIEW COMMITTEE
PART I – HEARING NOTICE**

Facility:

Offender's Name and Number:

In accordance with IMPP 10-118A, on _____, a hearing shall be conducted by the Involuntary
(Date)
Medication Review Committee giving you the opportunity to contest the administration of psychotropic medication
without your consent. Dr. _____ has diagnosed you as
(Name)
_____ and ordered that involuntary psychotropic medication is necessary
(Diagnosis)

_____ (rationale).

You have the right to appear at this hearing unless your attendance would likely pose a substantial risk of
serious harm to you or a threat to the safety of others.

_____ has been appointed to assist you and shall appear at the
hearing whether or not you appear.

(Offender's Signature)

_____ Offender refusal to sign

(Serving Employee's Printed Name)

(Serving Employee's Signature)

(Date Served)

(Time Served)

(Detach this page from page one (1) and submit it to the
Involuntary Medication Review Committee in advance of the hearing.)

PART II - REQUEST FOR WITNESSES

I, _____, Number _____, request that the following witnesses
(Name)

be interviewed by the Medical Treatment Review Committee at the hearing on _____.
(Date)

(You may submit written questions for witnesses)

1. Name of Witness: _____, Number: _____
Question: _____
2. Name of Witness: _____, Number: _____
Question: _____

Distribution: Health Record
Behavioral Health File
Involuntary Medication Review Committee
Offender
Staff Assistant
Treating Psychiatrist

**KANSAS DEPARTMENT OF CORRECTIONS
HEALTH SERVICES**

**INVOLUNTARY MEDICATION REVIEW COMMITTEE
HEARING SUMMARY**

Offender: _____ Number: _____

Staff Assistant: _____

Hearing Date: _____ Time: _____ am/pm

Facility: _____

Witnesses Requested: Yes ____ No ____

Witnesses Interviewed: Yes ____ No ____

___ Request Not Timely

___ Cumulative

___ Irrelevant

___ Other

Summary of Proceedings and Evidence:

Basis for Decision:

All of the following factors are present:

- ___ a. The offender suffers from a mental illness or mental disorder.
- ___ b. The medication is in the medical interest of the offender.
- ___ c. The offender is either gravely disabled or poses a likelihood of serious harm to himself or herself or others because, as a result of a mental illness or mental disorder, one or more of the following determinations has been made:
 - ___ The offender is in danger of serious physical harm resulting from his/her failure to provide for his/her essential human needs of health or safety.
 - ___ The offender manifests serious deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his/her actions which is likely to jeopardize the offender's health and safety.
 - ___ A substantial risk exists that physical harm will be inflicted by the offender upon his/her own self as evidenced by, among other things, threats or attempts to commit suicide or inflict physical harm on him/herself.

___ A substantial risk exists that physical harm will be inflicted by the offender as evidenced by, among other things, behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm.

___ A substantial risk exists that physical harm will be inflicted by the offender upon the property of others as evidence by, among other things, behavior which has caused substantial loss or damage to the property of others.

Action:

___ Concur with Involuntary Administration of Psychotropic Medication.

___ Do not concur with Involuntary Administration of Psychotropic Medication.

Chairperson:

(Printed Name)

(Title)

(Signature)

(Date)

Member:

(Printed Name)

(Title)

(Signature)

(Date)

NOTICE: The offender has the right to appeal this decision to the Regional Psychiatric Director by filing a written notice of appeal with the Chairperson of the Involuntary Medication Review Committee within 72 hours of receipt of this report. The assisting staff member shall assist in the appeal process if so requested by the offender.

(Employee Serving Copy to Offender)

(Date/Time Served)

Distribution: Health Record
Behavioral Health File
Offender
Involuntary Medication Review Committee
Regional Psychiatric Director

MEMORANDUM

DATE:

TO: Regional Psychiatric Director

FROM:

SUBJECT: Appeal of Involuntary Medication Review Committee's Decision

Dr. _____ has diagnosed _____, Number _____
(Offender)

as _____ and on _____ ordered psychotropic medication to be
(Diagnosis) (Date)

administered on an involuntary basis.

On _____ the Involuntary Medication Review Committee concurred that the offender was in
(Date)

need of involuntary medication. The offender has appealed the Committee's decision to you and this written notice of appeal is submitted for your review. Attached are all related Involuntary Medication Review Committee forms, medical records, and the offender's request for your review.

cc: Health Record
Behavioral Health File
Regional Psychiatric Director