

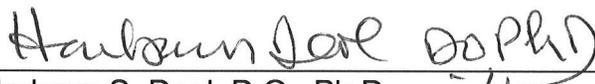
 Good Life. Great Mission. DEPT OF CORRECTIONAL SERVICES	POLICY		
	SOCIAL WORK SERVICES		
	REVISION DATE October 31, 2019	NUMBER 115.25	PAGE 1 of 6
STATEMENT OF AVAILABILITY *This Policy is to be made available in law libraries or other inmate resource centers.			

EFFECTIVE: December 31, 2014
 REVIEWED: November 30, 2015
 REVISED: December 31, 2016
 REVISED: November 30, 2017
 REVISED: December 31, 2018
 REVISED: October 31, 2019

SUMMARY OF REVISION/REVIEW

Changed name of the AR. Revised General section. Changes to 1, E. Minor wording revisions throughout.

APPROVED:



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PURPOSE

To provide the provision of social work services to discharging, post release supervision or paroling patients within the Nebraska Department of Correctional Services (NDCS) for the purpose of decreasing recidivism, promoting successful community reintegration, and addressing continuity of care among those patients deemed to have multiple and/or high needs.

GENERAL

Priority services for patients who may be served are those who have been identified as having the following risk factors and who usually have multiple needs (list is not all inclusive):

- A. Serious Mental Illness
- B. History of a Sex Offense
- C. History of Violent Offenses
- D. History of Chronic Substance Use
- E. Serious and Chronic Medical Conditions

Patients may obtain social work assistance depending on the number and severity of their risk factors. Other factors that will be taken into consideration for deciding who will receive social work services include the presence or absence of outside supports and financial entitlements which the patient/parolee may be able to access. Other patients not identified above may receive social work service if a review of their history and current functioning indicate they are not capable of arranging for their own discharge needs.

Certified Master Social Workers (CMSW) are certified by the state of Nebraska to provide social work services and are licensed as mental health practitioners or they are provisionally certified/licensed as such.

F. The primary role of the CMSW is to:

1. Assist identified priority needs patients with discharge planning and / or continuum of care
2. Serve as resource persons and consultants to other NDCS staff
3. Assist Mental Health/Substance Use Staff to provide services to patients/parolees as needed

Social work practicum students work under the supervision of the Social Workers in the institution in which they are placed, an NDCS CMSW, and under the supervision of their educational institution. Practicum students are provided placement in accordance with a written Affiliation Agreement between NDCS and their educational institution or they have submitted and had approved an application for a practicum placement.

Social Work Services (SWS) is under the Health Services Chain of Command. The Director of Social Work reports to the Behavioral Health Administrator. While Social Work is a distinct service in Behavioral Health Services, SWS seek to integrate all of the service components of the individuals with whom SWS work. Social Work staff will work collaboratively with probation,

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parole, NDCS programs and services to provide a continuum of care to patients as they are leaving the correctional system.

PROCEDURE

I. REFERRAL PROCESS

Any NDCS Staff can refer an patient for social work services if staff deems the patient needs assistance with discharge planning and/or has multiple needs and/or is high risk. The ways the referral can be initiated are listed here.

- A. Can submit form DCS-A-mnh-004, entitled: Mental Health/Medical Referral Form (Attachment A), to a social worker serving the institution where the patient is housed or to the Director of Social Work at the Nebraska State Penitentiary (NSP) or call or email the Director of Social Work or a social worker who covers the patient’s institution to discuss the possible referral (form DCS-A-mnh-004 may be requested).
- B. Referrals can also occur by phone, email, Inmate Interview Request Form (IIR), or direct contact to the Social Worker.
- C. Priority will be given to patients identified with a Serious Mental Illness’ (SMI). Determination of appropriateness of referral will be based on mental health information found in NICaMS, information provided by the referring source, a review of outside documentation, if available, and consultation with mental health and/or medical staff if the referral is from another source.

If the referred patient does not meet priority risk factors (as previously identified) for social work involvement, efforts will be made to provide resource information and/or consultation with the referring individual. Patients can refer themselves for social work assistance and will be helped based on the criteria noted above. Patients who have been referred to a social worker are not mandated to receive services and can refuse social work services if they so choose. Referrals can be made to the Reentry Specialist for requests that fall short of meeting Social Work Criteria.

- D. The social work referral will be reviewed for appropriateness of services based upon the review of NDCS records to determine if priority risk factors (as previously identified) are present.
- E. The referring person will be informed of the outcome which could be:
 - 1. The referral is appropriate, and a social worker will be assigned to meet with the referred patient/parolee.
 - 2. The referred patient does not meet the criteria for direct social work assistance.
 - 3. The referral source may be asked to resubmit the request if the patient’s discharge or parole hearing date six months out.
 - 4. When submitted, completed referral forms will be uploaded to NICaMS and entered into the patient’s file.
- F. Patients who received social work services while incarcerated and who will be discharging to parole may continue to receive social work assistance through the parole social worker if needed. Parolees who received social work assistance while at NDCS can be referred. SWS

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will communicate and document referral to the appropriate Division of Parole social worker and parole officer for continuity of care.

- G. Substance Use Unit patients may get priority CMSW assistance if there is a Residential Substance Abuse Treatment (RSAT) funded social worker assigned to their unit. These social workers are funded by the federally administered RSAT grant which determines patient eligibility for grant funded services. RSAT funded social workers will only be able to work with patients who are in or who have successfully graduated from a residential substance abuse treatment program during their current incarceration.
- H. When patients are transferred to other institutions within NDCS, the social worker who has started to work with an patient will continue to provide services when practical to do so; otherwise, the patient will be referred to another social worker to follow up with discharge planning if further planning is still needed.

II. TIME FRAME

Referrals should be made at least six months or more in advance of discharge to allow the social worker time to investigate the needs of the patient referred and get assistance in place prior to leaving.

III. SCOPE OF SERVICES THAT CAN BE PROVIDED AS NEED INDICATES

- A. Assistance with obtaining Social Security benefits
- B. Assistance with obtaining Medicaid benefits
- C. Assistance with appropriate living arrangements
- D. Follow-up medication management
- E. Follow-up mental health appointments
- F. Follow-up substance use treatment
- G. Assistance in obtaining identification documents
- H. Medical follow-up appointments
- I. Assist with Medical/Health Care Power of Attorney process
- J. Information about clothing resources
- K. Assistance with food resources, including Supplemental Nutrition Assistance Program (SNAP, aka Food Stamps)
- L. Resource and support services information
- M. Veterans assistance
- N. Information about work assistance resources
- O. Information about education resources

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P. Other services as identified

IV. DOCUMENTATION

Documentation of social work services will be maintained electronically on NICaMS on the Mental Health tab.

- A. Direct and collateral contacts will be noted and entered into NICaMS at the earliest opportunity but no later than fourteen days from when the contact took place.
- B. Releases of Information will be obtained to document the patient's/parolee's consent to obtain or share information with outside entities and the releases will be scanned into NICaMS.
- C. Other documents, such as a referral and / or discharge information form, will be uploaded and stored electronically in NICaMS.
- D. Patients who are recommended for SWS, but decline to accept will be asked to complete NDCS Behavioral Health Services and Programming Accept/Decline form (Attachment B). The original of the completed form will be given to the patient and a copy will be uploaded on to NICaMS. (4-4433)
- E. No records with identifying information will be taken off-site except for between facilities as necessary for the provision of services in institutions that are not where the social worker maintains their primary office. Reasonable efforts will be made to minimize the need to take any records outside of any institution. Any paper documentation will be securely stored.

V. SUICIDE PREVENTION/INTERVENTION

- A. Any social worker who has concerns about an patient/parolee being suicidal or aggressive either because of statements made by the patient or because of behavioral changes noted by the social worker will notify Mental Health Staff.
- B. Any concerns about suicidal or aggressive behaviors and the steps taken to address these concerns will be documented.

VI. NOTIFICATION

The social worker will notify the patient that discharge plans and needs will be shared with relevant institutional staff and community partners such as Reentry Services division of Parole and/or Probation.

REFERENCES

- I. STATUTORY REFERENCE – None noted
- II. NDCS POLICIES
 - A. Policy 115.23, *Mental Health Service*
 - B. Policy 115.09, *Substance use Treatment Programming, Detoxification and Chemical Dependency*

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- C. Policy 209.01, *Reentry Planning and Release*
- D. Policy 115.30, *Suicide Prevention/Intervention*
- E. Policy 210.01, *Discharge Planning for Segregated Patients*
- F. Policy 115.12, *Special Needs Patient Programs*

III. ATTACHMENTS

- A. Mental Health/Medical Referral Form: DCS-A-mnh-004 (11/98)
- B. NDCS Behavioral Health Services and Programming Accept/Decline form
- C. Release of Information: DCS-A-adm-009-pc REV 7/12

IV. AMERICAN CORRECTIONAL ASSOCIATION STANDARDS (ACA) STANDARDS

- A. Standards for Adult Correctional Institutions (ACI) (4th edition): 4-4433