Introduction

The Minnesota Department of Corrections (DOC) Health Services Unit provides medical, dental, and behavioral health care to offenders in ten state correctional facilities.

As part of the Health Services Unit, Behavioral Health Services offers mental health assessment, and treatment of mental health issues and disorders. Behavioral Health Services is also responsible for providing sex offender and chemical dependency treatment at designated facilities.

Mental health services includes support services, self-help groups, evaluations, and short-term treatment for less serious issues and longer-term, intensive treatment for more serious mental health issues that impair a person’s ability to perform or respond to day-to-day activities. Mental health services also responds to the needs of those considered to be seriously and persistently mentally ill, or who pose a risk to harm themselves or others. The most seriously mentally ill are treated in special units staffed by psychiatrists, neuropsychologists, psychologists, other licensed clinicians/supervisors, and non-licensed treatment staff. Designated facilities also offer ongoing supportive living services for offenders who may not be appropriate for placement in general population living units.

Continuum of Services

Mental health services includes a continuum of mental health care options available through self-, professional-, or institutional-referral. Approximately 30 percent of adult males, 60 percent of adult females, and 50 percent of juvenile males utilize ongoing mental health services.

At intake: All offenders participate in a brief mental health status screening during their initial institutional intake. Screening consists of a file review and brief clinical interview.

Offenders with a history of mental health/psychiatric intervention, suicide attempts, or who are currently displaying symptoms of mental distress/disorder are evaluated further. Evaluation consists of file review, clinical interviews, and obtaining collateral material from outside sources.

A full psychological evaluation consisting of collateral information, clinical interviews, and psychological testing is conducted when indicated.

During incarceration: Offenders receive an interview and file review for brief mental health intervention; a full psychological evaluation for long-term intervention and institutional placement planning; crisis evaluation of mental status for immediate intervention; neuropsychological evaluation for diagnostic purposes and institutional placement planning; intellectual functioning screening and evaluation for placement purposes; institutional discharge planning; and, evaluation according to specific referral questions.
**Release Planning**

The DOC has a number of offender re-entry initiatives, including the provision of specialty release planning services for offenders with mental health and/or medical needs. Release planning efforts and transitional services focus on the assessed clinical needs of offenders. The primary goal of release planning is to connect offenders to the community resources that are best suited to meet ongoing clinical needs. Whether it is setting psychiatric appointments, arranging for treatment aftercare, or connecting offenders with other types of programming in the community, release planners work closely with case managers, community supervising agents, and community service providers to create appropriate supports to assist offenders in successfully transitioning back to their communities.

**Other Activities**

Professional development through internships and training is available through Behavioral Health Services addressing: mental health services provisions in a correctional system; internship sites for college and graduate-level practicum and internship students; and opportunities for postgraduate competency in correctional mental health services.