

Texas Department of Criminal Justice

TCOOMMI

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for Medically Recommended Intensive Supervision (MRIS)

Program Guidelines and Processes

Subject:

Medical Recommended Intensive Supervision process for offenders with significant illnesses sentenced to serve felony convictions in TDCJ-CID or State Jails, county jails, concurrent Texas convictions in other State Prisons, and concurrent Texas convictions in Federal Correctional Institutions

Purpose:

To identify offenders as being elderly, physically handicapped, mentally ill, terminally ill, mentally retarded, or having a condition requiring long term care (see Attachment I)

Discussion:

Referrals may be unit direct from medical/mental health staff, from offenders, or from external sources (i.e., elected officials, family members, concerned citizens, social service agencies, etc.)

Guidelines:

Referrals will be screened by the TCOOMMI MRIS Program Supervisor utilizing the following minimum eligibility criteria:

- 1. Offenders must meet category definitions of elderly, physically handicapped, mentally ill, terminally ill, mentally retarded, or having a condition requiring long term care;
- Offenders must not have a sentence of death;
- 3. Offenders with a reportable conviction or adjudication under Chapter 62, Code of Criminal Procedure (sex offenses) may only be considered if in a persistent vegetative state or being a person with an organic brain syndrome with significant to total mobility impairment;
- 4. Offenders with a pending felony detainer for a sex offense may only be considered if in a persistent vegetative state or being a person with an organic brain syndrome with significant to total mobility impairment;
- 5. Offenders with an instant offense described under Section 3g, Article 42.12, Code of Criminal Procedure, may only be considered if a medical condition of terminal illness or long-term care has been diagnosed.

I. MRIS Referrals

A. Unit Direct Referrals

Medical / mental health staff who deems an offender appropriate for MRIS review will submit a MRIS medical / mental health summary to the MRIS Program Supervisor to screen for MRIS eligibility based on offense of commitment.

Medical summaries must be completed by a physician, physician's assistant or nurse practitioner, and mental health summaries must be completed by a licensed psychiatrist or physician assistant / nurse practitioner trained as a Correctional Managed Care mental health provider. By law, a qualifying diagnosis must be confirmed by a physician or psychiatrist. Confirmation will be indicated by physician/psychiatrist signature on the MRIS referral form.

• If ineligible, the Program Supervisor will transmit written notification, via EMR, to the requesting medical authority.

B. <u>Offender Referrals</u>

Upon receipt of written offender correspondence requesting MRIS consideration, the offender records will be reviewed for eligibility based on Texas Government Code: § 508.146.

- If eligible and the TDCJ computer system indicates a significant medical or mental health condition, an E-mail will be sent, via EMR, to the unit medical staff requesting recommendation based on the offender's current condition.
 - The unit medical staff will make recommendation for MRIS by forwarding the appropriate MRIS medical / mental health summary.
 - If it is the professional opinion of unit medical staff that the offender's condition does not warrant consideration, written notification stating, "clinical criteria not met" will be forwarded to the offender.
- If eligible and the TDCJ computer system does not indicate a significant medical or mental health condition, correspondence will be sent to the offender referring him/her to unit medical staff for further consideration.
- If ineligible, the Program Supervisor will transmit written notification to the offender.

C. External Referrals

Upon receipt of written correspondence or telephonic referral requesting MRIS consideration, the offender's records will be reviewed for determination of eligibility.

- If eligible, an E-mail will be sent, via EMR, to the unit medical staff requesting recommendation based on the offender's current condition
 - The unit medical staff will make recommendation for MRIS by forwarding the appropriate MRIS medical / mental health summary
 - ➤ If it is the professional opinion of unit medical staff that the offender's condition does not warrant consideration, written notification stating "clinical criteria not met" will be forwarded to the requestor
- If ineligible, the Program Supervisor will transmit written notification to the requestor

II. MRIS Eligible Process

- 1. Detainers will be reviewed on a case-by-case basis to determine further processing of eligible cases.
- Offenders serving concurrent TDCJ-CID and State Jail sentences will be processed for MRIS first for the CID sentence.
 - If approved for MRIS by the Texas Board of Pardons and Paroles, the sentencing judge will be notified for determination of MRIS on the State Jail sentence.
 - If denied MRIS by the Texas Board of Pardons and Paroles, no further action will be taken.
- In coordination with unit staff, TCOOMMI will obtain a MRIS Agreement Form, signed by the offender, as well as a current photo of the offender for inclusion in the transmittal to the Board of Pardons and Paroles.
 - If the offender refuses to proceed with Medically Recommended Intensive Supervision, the reason must be stated (i.e. prefers parole or prefer Mandatory Supervision, refused interview, refused nursing home).

III. TDCJ – Correctional Institutions Division (CID)

- The MRIS Administrative Assistant will request the parole file on eligible cases via e-mail to the TDCJ-PD Release Processing Administrative Technician. The e-mail will also include a request for Notices to Trial Officials (NTO) to be generated. Copy of this email to Victim Services staff will serve as notification of possible release.
- 2. The Administrative Assistant will verify the date of the most current parole case summary and, if necessary, request preparation of a new case summary from the appropriate Institutional Parole Office.
- 3. Upon receipt of the parole file, the Administrative Assistant will review the current case summary for any indication of an offense with sexual elements.
 - A. Offenders who do not have a conviction or adjudication under Chapter 62 of the Code of Criminal Procedures (sex offenses), but whose case summary indicates a sexual element during the commission of the offense, will be forwarded to the Program Specialist III, TDCJ-PD Specialized Programs.
 - B. The Program Supervisor will review and determine if the individual is classified as a sex offender,
 - If "no", the Administrative Assistant will proceed with the MRIS.
 - If "yes", the offender must meet the appropriate MRIS eligibility requirements for sex offenders.

4. Transmittal to Board Panel

- A. Upon receipt of the parole file, the Program Supervisor prepares a MRIS transmittal for the Texas Board of Pardons and Paroles (BPP) MRIS Panel
- B. The completed transmittal is attached to the front of the parole file and includes:
 - Board Member or Commissioner Panel Member's names
 - Date of report
 - Offender's name
 - TDCJ identification number

- State identification number (SID)
- Unit of assignment/Location
- Parole eligibility date
- Status custody level
- Minimum expiration date
- Referral source
- Category
- Diagnosis/Prognosis
- Life Expectancy
- Mobility Level
- Functional Limitations
- Post Release Needs
- Expected Transportation Needs
- Supplemental Report of On-Site Visit
- Present conviction information
- Criminal history
- Disciplinary history
- Recommended release plan
- Recommended Supervision level

Additional documents attached to the transmittal include the medical / mental health summary, TDCJ-CID disciplinary records, Supplemental Report of On-Site Visit, medical records and any additional information deemed necessary for the Board Panel's review

- C. Upon determination by the Board Panel, the transmittal, along with parole file, will be returned to the Program Supervisor in Huntsville, to include:
 - Board Recommendation (threat to public safety)
 - Board Determination (Approved or Deny)
 - Additional special conditions to be imposed
- D. The Administrative Assistant will transmit written notification of the Board Panel's decision to the offender, medical staff at the unit of assignment, Parole Division, and the TCOOMMI Human Service Specialist (HSS).
- E. The Administrative Assistant scans and e-mails to the TDCJ-PD Release Processing Analyst, a copy of the approved offender's parole guidelines, risk factor guidelines, initial case summary, most recent case summary and BPP minutes sheet indicating MRIS decision. Copies of all documents, as well as the completed BPP transmittal, are made for the TCOOMMI file.
- F. The parole file is forwarded to the TDCJ-PD Release Processing Analyst or appropriate Institutional Parole Officer (if in regular review process) with E-mail notice of the final decision. TDCJ Victim Services is copied on the E-mail for all cases with favorable decisions.
- 5. MRIS Decisions (CID)
 - A. Board Denied Cases
 - 1. Cases will be reconsidered:
 - as documented by the Board Panel on the transmittal, or
 - at the request of medical / mental health staff at any time they deem the offender's condition warrants reconsideration for MRIS.
 - 2. MRIS Program Supervisor will refer to the COC Program Supervisor, all MRIS denied cases with a mandatory or flat discharge date within six months of denial

B. Board Approved Cases

1. The Administrative Assistant prepares a Social Security Prerelease Application memorandum to the appropriate HSS for immediate completion and submission (48 hours) of aged or disability claim for cases in which applications have not been previously filed.

2. Release Planning

A. The Program Supervisor shall:

- Coordinate an appropriate release and continuity of care plan in accordance with post release needs.
- 2) Initiate, via E-mail, the plan investigation and request for parole certificate issuance with the TDCJ-PD Review and Release Processing staff.
 - a) The proposed plan is verified by the District Parole Office staff within one (1) working day. Upon verification of plan, the TDCJ-PD Release Processing Analyst will issue the parole certificate and notify the Program Supervisor via Email.
 - All plan investigations and/or placement requests to the District Parole Officer for Medically Recommended Intensive Supervision are a PRIORITY.
- Request continued medical updates until date of release to determine any changes/improvements condition which would warrant resubmission to the Board of Pardons and Paroles for further consideration or withdrawal of original vote.
- 4) In coordination with the TDCJ Health Services Transfer Liaison and TDCJ-CID Field Services Manager, the Program Supervisor schedules appropriate release transportation.
- 5) The Program Supervisor prepares written release notification to include:
 - Offender's name, TDCJ #, SID #, SSN and current unit of assignment
 - Release date/time
 - Release location
 - Transportation source
 - Release plan and contact
 - Parole Officer's name and contact information
 - Contract Caseworker's name and contact information
 - a) The release notification will be forwarded, via email, to all appropriate TDCJ administrative and unit personnel, and to the contract caseworker. Notification will be forwarded, via EMR, to unit medical staff.
 - b) If offender is released to a facility other than home placement and family contact information is unavailable, the appropriate unit Chaplain will be notified for assistance with family notification.
- 6) On the day prior to release, the MRIS Program Supervisor will obtain a current MRIS medical summary, signed by a physician. Based on this information the Program Supervisor will make a determination to continue with release as scheduled or cancel release pending further instruction from the Texas Board of Pardons and Paroles.

• If the release is scheduled on a Monday, or first day following a scheduled holiday, the request will be made on the last working day prior. If a determination is made to continue with release, an email will be forwarded to the unit physician and appropriate unit staff with instructions should the offender's condition improve. The offender shall not be released as scheduled without notification to TCOOMMI on the morning of release.

IV. TDCJ - State Jail

- 1. An NCIC/TCIC background check will be completed to determine any outstanding warrants for the State Jail confinee. Evidence of warrants will preclude further processing.
- 2. Transmittal to Judge of Record
 - A. The Program Supervisor prepares a MRIS transmittal which is forwarded to the Judge and includes:
 - Presiding Judge's name and court information
 - Date of report
 - Offender's name
 - TDCJ identification number
 - State identification number (SID)
 - Unit of assignment/Location
 - State Jail offense and Cause #
 - Sentence Term
 - Sentence Date
 - Term Expiration
 - Disciplinary History
 - Diagnosis/Prognosis
 - Life Expectancy
 - Elle Expectane
 - Mobility Level
 - Functional Limitations
 - Post Release Needs
 - Expected Transportation Needs
 - Recommended release plan
 - Additional documents attached to the transmittal may include the medical/-mental health summary, and any additional information deemed necessary for the Judge's review
 - B. A request will be made that the presiding Judge respond to the Program Supervisor, in writing, of the decision. If MRIS approval is granted, a copy of the court order will be forwarded to the Program Supervisor at this time.
 - C. The Administrative Assistant will transmit written notification of the Judge's decision to the offender, medical staff at the unit of assignment, and the HSS.
- 3. MRIS Decisions (State Jail)
 - A. Denied Cases
 - 1. Cases will be reconsidered:
 - at the request of medical / mental health staff at any time they deem the offender's condition warrants reconsideration for MRIS.

B. Approved Cases

The Administrative Assistant prepares a Social Security Pre-Release Application memorandum
to the appropriate HSS for immediate completion and submission (48 hours) of aged or disability
claim for cases in which applications have not been previously filed.

2. Release Planning

A. The Program Supervisor shall:

- Request continued medical updates until date of release to determine any changes/improvements condition which would warrant resubmission to the Board of Pardons and Paroles for further consideration or withdrawal of original vote.
- 2) Notify, via email, the Assistant Regional Director, Community Justice and Assistance Division (CJAD), who will in turn coordinate with the Community Supervision Officer (CSO) at the appropriate Community Supervision and Corrections Department (CSCD) serving the sentencing court.
 - ➤ The CJAD Assistant Regional Director, will provide the Program Supervisor, via email, the name and contact information of the appropriate CSCD and CSO
- 3) Coordinate an appropriate release and continuity of care plan in accordance with the court order and any post release needs
- 4) In cooperation with the TDCJ Health Services Transfer Liaison and TDCJ-CID Field Services Manager, coordinate appropriate release transportation.
- 5) Forward a copy of the court order to the appropriate State Jail facility Senior Warden, Chief of Classification, and other appropriate TDCJ staff who will in turn await further instructions from TCOOMMI regarding placement instructions and release date.
- B. The Program Supervisor prepares written release notification to include:
 - Offender's name, TDCJ #, SID #, SSN and current unit of assignment
 - Release date/time
 - Release location
 - Transportation source
 - Release plan and contact
 - CSO's name and contact information
 - Contract Caseworker's name and contact information
 - a) The release notification will be forwarded, via email, to all appropriate TDCJ administrative and State Jail personnel, the CJAD Assistant Regional Director, the CSO, and the HSS. Notification will be forwarded, via EMR, to unit medical staff.
 - b) If offender is released to a facility other than home placement and family contact information is unavailable, the appropriate unit Chaplain will be notified for assistance with family notification.
 - c) On the day prior to release, the MRIS Program Supervisor will obtain a current MRIS medical summary, signed by a physician, and based on this information make a determination to continue with or cancel release on the following day.
 - If the release is scheduled on a Monday, or first day following a scheduled holiday, the request will be made on the last working day prior. If a determination is made

to continue with release, an email will be forwarded to the unit physician and appropriate unit staff with instructions should the offender's condition improve. The offender shall not be released as scheduled without notification to TCOOMMI on the morning of release.

V. Social Security Applications

1. The TCOOMMI Human Services Specialist (HSS) will provide pre-release Social Security Insurance application services, to assist the offender with special needs, in coordinating aftercare federal entitlement benefits.

The HSS will:

- ensure that a Social Security Insurance Pre-Application interview is completed for MRIS approved cases within forty-eight (48) hours of receipt of the TCOOMMI referral
- secure the appropriate medical / mental health records to be provided with the application as supportive information
- submit the completed Social Security forms, with supporting documentation, to the local Social Security Administration office
- provide application status to the MRIS Program Supervisor, via email, seven (7) calendar days following application submission to SSA.
- 3. The HSS will contact the SSA field office every three (3) days thereafter, until such time as the claim is identified as "active" in the SSA system. Once the application is active, no further follow-ups will be necessary.

VI. Post Release Case Management

- 1. The supervising HSS will:
 - A. Contact the releasee within 24 hours (first working day if release occurs after 12:00 pm or on Friday and/or on a Holiday) following release
 - B. Complete two (2) face-to-face or telephonic contacts with releasee each month and will update the appropriate contact information worksheet accordingly.
 - C. Contact the Parole or CSCD officer monthly by phone or in person to exchange information relevant to the placement and condition of the releasee.
 - D. Complete Incident Reports and submit to the Program Supervisor within 24 hours of receiving information related to violations of conditions of release
 - E. Report to the Program Supervisor within 48 hours, via email, upon receiving notification of a releasee death.
 - F. If necessary, coordinate with the Department of State Health Services and/or Department of Assistive and Rehabilitative Services to ensure appropriate post-release healthcare needs are met.
 - G. Provide a Quarterly Releasee Status Report
 - a) On a quarterly basis, a MRIS Releasee Status Report will be provided to the Program Supervisor who will compile and submit a Quarterly Placement Status Report to the Board of

Pardons and Paroles

- On the basis of the TCOOMMI quarterly report, the Parole Board may modify conditions of release and impose any condition on the releasee.
- Any changes to the conditions of release will be reported to the MRIS Program Supervisor

VII. Interstate Compact

- 1. Offenders approved for MRIS who are released thru Interstate Compact will not be supervised by a TCOOMMI Human Service Specialist.
- 2. The TDCJ Parole Division supervising parole officer will contact the MRIS Program Supervisor-with changes in medical or supervision status, or the death of the releasee.

April Zamora, Reentry and Integration Division, Director

Date

MRIS Eligibility Criteria

Medically Recommended Intensive Supervision (MRIS) provides for the early parole review and release of certain categories of offenders who are mentally ill, mentally retarded, elderly, terminally ill, physically handicapped, or require long-term care. The purpose of MRIS is to release inmates, who pose minimal public safety risk, from incarceration to more cost effective alternatives. Offenders sentenced to death are not eligible and all other offenders are eligible as follows:

- Non-3G offenders and State Jail confinees are eligible in all categories
- 3G offenders (those serving a sentence for an aggravated offense) are eligible only if terminally ill or requiring long term care.
- Sex Offenders may be given consideration only if in a persistent vegetative state or with an organic brain syndrome with significant to total mobility impairment

Definitions

ELDERLY	Means an offender sixty-five (65) years of age or older.
LONG TERM CARE	Means a person who is deficient in the area of self-care and where there is a reasonable medical probability that the clinical condition(s) producing that inability will not change over time and requires nursing care.
MENTALLY ILL	Has the meaning assigned by Section 4, Texas Mental Health Code (Article 5547-4, VTCS) and means an illness, disease, or condition that either substantially impairs a person's thoughts, perception of reality, emotional process, judgment, or grossly impairs a person's behavior, as manifested by recent disturbed behavior.
MENTALLY RETARDED	Has the meaning assigned by Section 3, MRPA of 1977 (Article 5547-300, VTCS) means significantly sub-average intellectual functioning existing concurrently with deficits in adaptive behavior and originating in the developmental period (until the age of 18).
ORGANIC BRAIN SYNDROME	Any of a group of acute or chronic syndromes involving temporary or permanent impairment of brain function caused by trauma, infection, toxin, tumor, or tissue sclerosis, and causing mild-to-severe impairment of memory, orientation, judgment, intellectual functions, and emotional adjustment.
PERSISTENT VEGETATIVE STATE	A condition of profound non-responsiveness in the wakeful state caused by brain damage at any level and characterized by a nonfunctioning cerebral cortex, absence of response to the external environment, akinesia, mutism, and inability to signal.

PHYSICALLY HANDICAPPED	A severe, chronic disability that is likely to continue indefinitely and results in substantial functional limitations in three or more of the following areas of major life activity: self care, self-direction, learning, receptive and expressive language, mobility, capacity for independent living, or economic self-sufficiency. These limitations are reflected in the person's need for a combination and
	sequence of special, interdisciplinary, or generic care, treatment, or other services of extended or lifelong duration that are individually planned and coordinated.
TERMINALLY ILL	Is a condition which is incurable and would inevitably result in death within six (6) months regardless of life sustaining treatment and requiring skilled nursing care, hospice or home health care.