

DIVISION OF DEVELOPMENTAL DISABILITIES Olympia, Washington

TITLE: DANGEROUS MENTALLY ILL OFFENDER PROGRAM POLICY 15.06

Authority: Chapter 71A RCW Developmental Disabilities

RCW 71.24.470-480 Dangerous Mentally Ill Offenders

RCW 72.09.370 Dangerous Mentally Ill Offenders (DOC)

PURPOSE

This policy establishes guidelines for Division of Developmental Disabilities (DDD) staff involved in pre-release planning, community transition, and overseeing special funds available to division clients who are designated as participants in the Dangerous Mentally III Offender (DMIO) Program per RCW 72.09.370.

<u>Note</u>: Within the Department of Corrections (DOC), this program is called the DMIO Program. The DSHS Mental Health Division (MHD) has renamed it the Community Integration and Assistance Program (CIAP).

SCOPE

This policy applies to DDD staff working with division clients who are participants in the DMIO Program.

DEFINITIONS

Dangerous Mentally Ill Offender means an individual who is reasonably believed to be dangerous to self or others and who has a diagnosed mental disorder. For the purposes of this policy, DMIO means a division client who has been selected by the DOC DMIO Statewide Review Committee to be a participant in the DMIO Program.

Program Participant means a division client who is participating in the DMIO Program.

DMIO Funds means any specialized monies/funding available to DMIO program participants. Program participants are eligible to receive sixty (60) service months, or up to a maximum of \$10,000 annually in services and/or goods.

POLICY

- A. DDD will participate in pre-release planning and community transition support services for DMIO program participants as required under RCW 72.09.370(2).
- B. DDD will manage individual program participants' DMIO funds as determined by the DMIO Statewide Review Committee. Typically, either the assigned Regional Support Network (RSN) or DDD will manage and monitor the use of DMIO funds.
- C. DMIO funds may be used for services to assist DMIO program participants. The services may include, but are not limited to:
 - 1. Coordination of mental health services;
 - 2. Assistance with unfunded medical expenses;
 - 3. Obtaining chemical dependency treatment;
 - 4. Housing;
 - 5. Employment services;
 - 6. Education or vocational training;
 - 7. Independent living skills;
 - 8. Parenting education;
 - 9. Anger management services;
 - 10. Other services/personal needs as determined necessary by the Central Office DMIO Program Manager or designee. This may include sexual deviancy therapy, polygraph testing, or plethysmograph testing; and
 - 11. Extraordinary transportation expenses. <u>Note</u>: If the client is on a HCBS waiver, do not pay transportation expenses out of DMIO funds.

<u>Note</u>: Some purchases may not be appropriate expenditures of DMIO funds (e.g., car insurance, etc.). Contact the Central Office DMIO Program Manager for guidance in this area.

PROCEDURES

A. <u>Central Office DMIO Program Manager Responsibilities</u>

- 1. Assist the DOC in identification of offenders who are or have been division clients;
- 2. Participate as a member of the DMIO Statewide Selection Review Committee;
- 3. Following designation of a division client as a DMIO program participant, notify the region where the client will be residing upon release from DOC custody and provide the region with the DMIO information packet;
- 4. Facilitate communication and coordination between DOC and the receiving region;
- 5. Participate in pre-release planning meetings as necessary;
- 6. Provide consultation to regional Field Services staff regarding the DMIO program requirements and individual program participants;
- 7. Serve as the division contact with the Mental Health Division (MHD) on all DMIO issues; and
- 8. Arrange for the transfer of DMIO funds, when available, from the MHD to DDD.

B. Case Resource Manager (CRM) Responsibilities

- 1. Enter the DMIO participant's DMIO start date, end date, and DMIO funds manager (i.e., RSN or DDD) in the Mental Health screen in the Comprehensive Assessment and Reporting Evaluation (CARE) system.
- 2. Participate in pre-release planning meetings with the offender, DOC institution staff, DOC Risk Management Specialists (RMS), Community Corrections Officers (CCO), Regional Support Network (RSN), contracted DMIO mental health provider, chemical dependency specialists, law enforcement, and others as appropriate;
- 3. Assist the client's DOC team, including the Risk Management Specialist and the DMIO contracted mental health provider (if there is one), in developing the post-release transition plan;

- 4. Coordinate implementation of post-release DDD services and assist with other services as appropriate;
- 5. Provide ongoing case management to the program participant;
- 6. For program participants whose DMIO funds have been transferred to DDD, with the participant and his/her treatment team, the CRM will:
 - a. Determine what to purchase with these funds;
 - b. Authorize services/purchases through SSPS (See Appendix E of the SSPS Manual for the DMIO 8500 codes); and
 - c. Keep track of these purchases for semi-annual reporting to the Central Office Program Manager.

C. DMIO Funds

- 1. DMIO program participants may receive, upon release from DOC custody, \$10,000 per year in DMIO funds for up to 60 service months.
- 2. The Central Office Program Manager, in concert with administration financial staff, will arrange for the transfer of the DMIO funds from the MHD to the receiving DDD region for those program participants whose DMIO funds are managed by DDD.
- 3. Regional Business Managers, or other regional designees, are responsible for tracking and maintaining financial records of DMIO expenditures for each program participant.

EXCEPTION

Any exception to this policy must have the prior written approval of the Division Director.

SUPERSESSION

DDD Policy 5.16 Issued November 1, 2007

DDD Policy 15.06 Issued June 13, 2003

| TITLE: | DANGEROUS MENTALLY ILL OFFENDER | R PROG | RAM | POLICY 1 | 5.06 |
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| Approved: | /s/ Linda Rolfe Director, Division of Developmental Disabilities | Date: | April 1 | <u>, 2008</u> | |
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