POLICY STATEMENT:

A prisoner in a correctional facility who appears to be engaging in a hunger strike shall be immediately identified, evaluated, and managed as set forth in this policy.

POLICY:

DEFINITIONS

A. Qualified Mental Health Professional (QMHP): A physician, psychiatrist, psychologist, social worker, registered nurse, or other health professional who is trained and experienced in the areas of mental illness and is licensed by the State of Michigan or, if licensure is not required, certified to practice within the scope of his/her training.

GENERAL INFORMATION

B. The Warden and health care staff shall be immediately notified whenever staff become aware that a prisoner has not consumed food for 72 continuous hours or has not ingested liquids for 24 continuous hours or, during a heat alert, 12 continuous hours. Upon receipt of this notification, health care staff shall promptly perform a medical evaluation to assess the prisoner's physical health condition. The medical evaluation shall be documented in the prisoner's health record; it shall be documented in the prisoner health record if the prisoner refuses to participate in the evaluation.

C. At the time of the medical evaluation, health care staff also shall counsel the prisoner on the consequences of not eating or drinking and answer any questions the prisoner has. The Prisoner Acknowledgement of the Consequences of Refusing Food and/or Liquid (CHJ-459) shall be signed and dated by the prisoner to acknowledge that s/he was fully informed of the consequences of his/her behavior. If the prisoner refuses to sign the form or refuses to allow the counseling to be provided, staff shall indicate that on the form. The completed form shall be retained in the prisoner’s health record and a copy provided to the prisoner.

D. Health care staff shall refer the prisoner to a QMHP for a mental health evaluation. The QMHP shall promptly perform a face-to-face comprehensive mental health evaluation with special attention being made to the contribution made by any mental illness to the prisoner’s refusal to eat or drink. The prisoner shall be referred for, and receive, additional mental health services, including inpatient services, as necessary in accordance with Department policy. All mental health evaluations and services, including any refusal by the prisoner to participate, shall be documented in the prisoner’s health record.

E. If the prisoner continues to not eat food or drink liquids, the prisoner shall be considered to be engaging in a hunger strike regardless of the motivation for his/her actions. The prisoner shall be referred to health care services to be seen by a medical provider (i.e., physician, physician assistant, or nurse practitioner) for a medical evaluation and counseling. A hunger striking prisoner housed in general population shall be permitted to remain in general population as long as his/her conduct does not otherwise warrant a change in custody status. If the prisoner is housed in segregation, housing staff shall monitor the prisoner's intake of food and drink, including any refusal, and ensure that food and drink are offered to the prisoner at least three times per day during the segregation unit’s normal meal
times; this shall be documented in the appropriate logbook. Mentally ill prisoners whose mental illness is not contributing to the hunger strike shall be managed similarly to prisoners without mental illness who may be engaged in a hunger strike.

F. Health care staff shall monitor the condition of a prisoner engaging in a hunger strike, including the prisoner's food and water intake, and continue to counsel the prisoner on the consequences of his/her behavior. Medical evaluations shall be ordered as needed on a prisoner engaging in a hunger strike to assess the degree of deterioration caused by the lack of food or water; this may include the taking of blood, urine, or other biological samples as clinically indicated. The Warden and appropriate health care staff shall be notified if reliable evidence indicates that the prisoner has ended the hunger strike (e.g., the prisoner eating and drinking appropriately, the prisoner maintaining his/her weight in the absence of abnormal fluid status). In such cases, the Warden and appropriate health care staff shall determine whether or not monitoring activities may cease.

G. The appropriate Regional Medical Officer shall ensure that all medical and mental health evaluations and monitoring required by this policy are provided. If an evaluation cannot be conducted without undue danger to staff, the prisoner, or others, the Regional Medical Officer shall contact the Chief Medical Officer to obtain further direction on how to proceed; the Chief Medical Officer shall consult with the CFA Deputy Director or designee if custodial assistance may be required to conduct the examination.

H. The Administrator of the Office of Legal Affairs shall be contacted through the appropriate chain of command if the prisoner’s condition deteriorates to the point that s/he may experience permanent and serious ill effects of the hunger strike or if a QMHP or Medical Practitioner (i.e., physician, physician's assistant, nurse practitioner) determines that the prisoner does not have the capacity to make an informed decision. The Administrator of the Office of Legal Affairs shall subsequently consult with the Department of the Attorney General to determine whether legal intervention is warranted, including the appointment of a guardian.

I. All media contact about or with a hunger striking prisoner shall be coordinated by the Office of Public Information and Communications in accordance with PD 01.06.130 “Media Relations”.

OPERATING PROCEDURES

J. The CFA Deputy Director shall ensure that a procedure is developed to implement requirements set forth in this policy directive. The procedure shall be completed prior to the effective date of this policy directive. Wardens shall ensure that any operating procedures at this facility which implement this policy directive are revised or rescinded, as appropriate, if inconsistent with policy requirements or no longer needed. Facility procedures shall not conflict with the procedure issued by the Director.

AUDIT ELEMENTS

K. A Primary Audit Elements List has been developed and is available on the Department's Document Access System to assist Wardens and the BHCS Administrator with self audit of this policy pursuant to PD 01.05.100 "Self Audit of Policies and Procedures".

APPROVED: PLC 12/20/07