Int. No. 1590-A

By Council Members Chin, the Speaker (Council Member Johnson), and Council Members Levin, Powers, Rosenthal, Brannan, Ampry-Samuel, Kallos, Ayala and Treyger

..Title

A Local Law to amend the administrative code of the city of New York, in relation to requiring correctional health services to report information to the attorney of record for individuals in the custody of the department of correction who are diagnosed with serious mental illness

..Body

Be it enacted by the Council as follows:

Section 1. Section 17-1801 of the administrative code of the city of New York, as added by local law number 124 for the year 2016, is amended by adding one term and amending another term to read as follows:

Correctional health services. The term “correctional health services” means any health care entity designated by the city of New York as the agency or agencies responsible for health services for incarcerated individuals in the care and custody of the New York city department of correction. When the responsibility is contractually shared with an outside provider, this term shall also apply.

 [Inmate] Incarcerated Individual. The term ["inmate"] incarcerated individual means any person in the custody of the New York city department of correction.

§ 2. The section heading of section 17-1803 of the administrative code of the city of New York, as added by local law number 124 for the year 2016, is amended to read as follows:

§ 17-1803 [Inmate health] Health information from screening for incarcerated individuals.

§ 3. The section heading of section 17-1804 of the administrative code of the city of New York, as added by local law number 124 for the year 2016, is amended to read as follows:

§ 17-1804 [Inmate health] Health information exchange for incarcerated individuals.

§ 4. Chapter 18 of title 17 of the administrative code of the city of New York is amended by adding a new section 17-1805 to read as follows:

§ 17-1805 Communication from correctional health services.

a. Short title. This section shall be known as and may be cited as “The Get Well and Get Out Act”.

b. Information sharing with attorneys of individuals diagnosed with serious mental illness in the custody of the department of correction. For each incarcerated individual who is not sentenced and who is diagnosed with a serious mental illness, correctional health services shall seek voluntary consent from such individual to share medical information with the attorney of record of such individual within 48 hours of their diagnosis, and provide such information created or obtained pursuant to sections 17-1802 and 17-1804 to the attorney of record for any such individual within five calendar days of obtaining consent from the individual. Correctional health services shall make a good faith effort to ascertain such individual’s attorney of record, including but not limited to consulting the website maintained by the New York state unified court system, speaking with the individual, contacting the clerk of the court, or any other reasonable means necessary to identify such individual’s attorney.

c. Confidential medical condition letter. Within five business days prior to any court date indicated by the New York city department of correction’s inmate information system, correctional health services shall provide a confidential medical condition letter to the attorney of record for any incarcerated individual to whom subdivision a of this section applies, as permitted by law. Such letter shall include the following information for each such individual:

1. The psychiatric diagnosis.

2. The type of mental health treatment available in the housing area in which the individual is being housed, including the level of additional support offered in the housing area that facilitates the treatment of the individual’s psychiatric condition.

3. The prescribed psychiatric medication regimen.

4. Their record of adherence to such medication regimen, including any factors that may have contributed to their record of adherence.

5. A detailed description of their current condition, including but not limited to any reduction in symptoms and any indication that the individual’s condition has improved or diagnosis changed.

6. Any relevant documentation related to referrals made by correctional health services for the purpose of discharge planning, if available.

d. Notwithstanding the requirements of subdivision c, correctional health services shall not be required to issue a new confidential medical condition letter for a scheduled court appearance within one week of a prior scheduled court appearance.

§ 5. This local law takes effect 120 days after it becomes law.

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