

TITLE 66  
STATE CHARITABLE INSTITUTIONS

CHAPTER 13  
IDAHO SECURITY MEDICAL PROGRAM

66-1301. PROGRAM ESTABLISHED. The state board of correction shall establish, operate and maintain a program for persons displaying evidence of mental illness or psychosocial disorders and requiring diagnostic services and treatment in a maximum security setting, and for other criminal commitments as determined by the board of correction or its designee. The program shall be identifiably separate and apart from those functions and other programs maintained by the board for the ordinary prison population.

[66-1301, added 1976, ch. 360, sec. 2, p. 1179; am. 1981, ch. 114, sec. 36, p. 194; am. 2007, ch. 336, sec. 2, p. 985.]

66-1302. ADMINISTRATOR. An administrator of the Idaho security medical program shall be appointed by the board of correction or its designee. The administrator shall be a reputable and qualified person experienced in the administration of programs for the care and treatment of persons afflicted with mental disorders and with such other qualifications as the board deems necessary.

[66-1302, added 1976, ch. 360, sec. 2, p. 1180; am. 1981, ch. 114, sec. 37, p. 194; am. 2007, ch. 336, sec. 3, p. 985.]

66-1303. ADMINISTRATOR'S DUTIES. The administrator shall:

(1) Perform all duties required by law and by the board of correction not inconsistent with this chapter.

(2) Maintain cognizance of and secure the professional care and treatment of each patient.

(3) Maintain a complete record on the condition of each patient.

(4) Retain custody of all patients in such manner as deemed necessary and in the best interest of the patients subject to the rules of the board of correction.

(5) Advise and consult with the director of the department of correction regarding the admissions and releases of patients to and from the program within any facility.

(6) To have care and custody over inmates assigned to the program under the provisions of section [66-1301](#), Idaho Code.

[66-1303, added 1976, ch. 360, sec. 2, p. 1180; am. 1981, ch. 114, sec. 38, p. 194; am. 2007, ch. 336, sec. 4, p. 986.]

66-1304. SOURCES OF RESIDENTS. (1) Patients admitted to the program may originate from the following sources:

(a) Commitments by the courts as unfit to proceed pursuant to section [18-212](#), Idaho Code.

(b) Commitments by the courts of persons acquitted of a crime on the grounds of mental illness or defect pursuant to section [18-214](#), Idaho Code.

(c) Referrals by the courts for psychosocial diagnosis and recommendations as part of the pretrial or presentence procedure or determination of mental competency to stand trial.

(d) Mentally ill adult prisoners from city, county and state correctional institutions for diagnosis, evaluation or treatment.

(e) Commitments by the courts pursuant to section [66-329](#), Idaho Code.

(f) Criminal commitments of the Idaho department of correction requiring some form of specialized program not otherwise available.

(2) Residents coming to the program in the circumstances of subsection (1) (a), (b) and (e) of this section must first be found to be both dangerous and mentally ill, as defined in section [66-1305](#), Idaho Code, in judicial proceedings conducted in accordance with section [66-329](#), Idaho Code.

[66-1304, added 1976, ch. 360, sec. 2, p. 1180; am. 1981, ch. 114, sec. 39, p. 195; am. 2007, ch. 336, sec. 5, p. 986.]

66-1305. DANGEROUS AND MENTALLY ILL PERSONS DEFINED. For purposes of this chapter persons found to be both dangerous and mentally ill shall mean persons found by a court of competent jurisdiction pursuant to any lawful proceeding:

(1) To be in such mental condition that they are in need of supervision, evaluation, treatment and care; and

(2) To present a substantial risk of physical harm to other persons as manifested by evidence of homicidal or other violent behavior or evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them; and

(3) To be dangerous to such a degree that a maximum security treatment setting is required.

[66-1305, added 1976, ch. 360, sec. 2, p. 1181; am. 1981, ch. 114, sec. 40, p. 195; am. 2007, ch. 336, sec. 6, p. 986.]

66-1306. FINAL DECISION. The final decision regarding the admission or discharge of patients to the program shall rest with the director of the department of correction, after consultation with the administrator.

[66-1306, added 1976, ch. 360, sec. 2, p. 1181; am. 2007, ch. 336, sec. 7, p. 987.]

66-1307. RETURN OF PATIENT. When a patient transferred under the program from any other correctional institution or admitted by order of any court no longer requires special treatment in the maximum security setting, the patient shall be returned to the source from which received. The correctional institution or court that referred the patient to the program shall retain constructive jurisdiction over the patient.

[66-1307, added 1976, ch. 360, sec. 2, p. 1181; am. 2007, ch. 336, sec. 8, p. 987.]

66-1308. TRANSPORTATION OF PATIENTS. When a patient is admitted to the program from a state institution or by order of any court, the expenses and responsibility for transportation of such patients from and to the facility where the patient will be admitted into the program shall be borne by the original institution or the county of the court ordering such admission.

[66-1308, added 1976, ch. 360, sec. 2, p. 1181; am. 2007, ch. 336, sec. 9, p. 987.]

66-1309. COSTS AND CHARGES. The administrator shall seek recovery for expenses incurred in the evaluation, treatment and care of residents as follows:

(a) Extraordinary costs for evaluation, treatment and care of referrees by the court for psychosocial diagnosis and recommendations as part of the pretrial or presentence procedure or determination of fitness to proceed shall be charged to the court referring such persons.

(b) Extraordinary costs for evaluation, treatment and care of mentally ill prisoners from county jails admitted for diagnosis shall be charged to the county so referring.

(c) Extraordinary costs for evaluation, treatment and care of commitments by the courts as unfit to proceed shall be the responsibility of the court so committing.

(d) Commitments by the courts after acquittal of a crime on the grounds of mental illness or defect shall be considered a responsibility of the department of correction.

(e) Transferees from other institutions under the jurisdiction of the department of correction shall be considered a responsibility of the department of correction.

(f) For purposes of this section, the term "extraordinary costs of evaluation, treatment and care" includes but is not limited to neurological evaluation, CAT scan, endocrine and/or metabolic evaluation, electroconvulsive therapy, surgery or medical treatment which requires the patient to be transferred to a hospital outside the facility, eyeglasses, and expert witness fees and expenses for court appearances; provided, however, the term does not include physical examination, psychiatric evaluation, psychological testing, obtaining social, medical and criminal histories, group and individual therapy, psychiatric treatment, medication, medical care which can be provided at the facility which is not elective or cosmetic, emergency dental treatment provided at the facility, and board, room and basic toiletries.

[66-1309, added 1976, ch. 360, sec. 2, p. 1181; am. 1981, ch. 114, sec. 41, p. 195.]

66-1310. CIVIL RIGHTS OF RESIDENTS. All patients received from any institution or facility under the jurisdiction of the department of health and welfare shall be accorded those civil rights provided by section [66-346](#), Idaho Code, with the exception of those aspects of the right to privacy which are inconsistent with the maintenance of a maximum security setting.

[66-1310, added 1976, ch. 360, sec. 2, p. 1182.]

66-1311. RIGHT TO HUMANE CARE AND TREATMENT. Every patient shall be entitled to humane care and treatment.

[66-1311, added 1976, ch. 360, sec. 2, p. 1182.]

66-1312. STANDARDS FOR TREATMENT. The department of correction and the department of health and welfare shall jointly develop appropriate standards for treatment of patients committed under this program. It shall

be the responsibility of the administrator of the program to implement those standards.

[66-1312, added 1976, ch. 360, sec. 2, p. 1182; am. 2007, ch. 336, sec. 10, p. 987.]

66-1313. MECHANICAL RESTRAINTS. Mechanical restraints shall not be applied to a patient unless it is determined that such is necessary for either his safety or the safety of other persons at the facility. Every use of a mechanical restraint and the reasons therefor shall be made a part of the clinical record of the patient under the signature of the administrator of the program, except that mechanical restraints may be used without such recording during transportation of residents from or to any facility.

[66-1313, added 1976, ch. 360, sec. 2, p. 1182; am. 2007, ch. 336, sec. 11, p. 987.]

66-1314. INTERSTATE CONTRACTS. The administrator is authorized to enter into agreements, through the department of correction, with other states for diagnosis and treatment of persons from such states who are both dangerous and mentally ill, on the basis of patient exchange or per diem interstate billing of all costs and expenses.

[66-1314, added 1976, ch. 360, sec. 2, p. 1182.]

66-1315. SHORT TITLE. This chapter may be referred to as and cited as the "Idaho Security Medical Program Act."

[66-1315, added 1976, ch. 360, sec. 2, p. 1183; am. 2007, ch. 336, sec. 12, p. 988.]

66-1316. PATIENTS FROM OTHER INSTITUTIONS. The state board of correction shall be authorized to receive and admit patients of any institution or facility under the jurisdiction of the department of health and welfare, which patients have been determined by a court to be both dangerous and mentally ill as defined in section [66-1305](#), Idaho Code. The department of health and welfare shall in such cases, retain jurisdiction over the patients.

[66-1316, added 1976, ch. 360, sec. 3, p. 1183; am. 1977, ch. 121, sec. 1, p. 260; 1979, ch. 50, sec. 1, p. 140.]

66-1317. REVIEW OF INVOLUNTARY TREATMENT. The state board of correction shall adopt procedures ensuring that treatment plans are developed for patients in the program for whom the court has authorized treatment, that the relative risks and benefits of specific modes of treatment contained in such plans are explained, to the extent possible, to each patient; that when treatment is given over the objection of a patient, there is a review of the decision to provide treatment independent of the treating professional and that a statement explaining the reasons for giving treatment over objection of the patient shall be entered in the patient's treatment record over the signature of the program administrator.

[66-1317, added 1982, ch. 368, sec. 11, p. 926; am. 2007, ch. 336, sec. 13, p. 988.]

66-1318. TRANSFER TO NONCORRECTIONAL FACILITIES. Prisoners with a mental illness or defect committed to the board of correction may be transferred to facilities of the department of health and welfare in accordance with rules adopted pursuant to section [66-335](#), Idaho Code.

[66-1318, added 1982, ch. 368, sec. 12, p. 926.]