Rochester Psychiatric Center
Rochester Regional Forensic Unit

An Information Handbook
for Families and Friends of Inpatients
on the Rochester Regional Forensic Unit (RRFU)

RPC/RRFU
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Part of the New York State Office of Mental Health
A Fully Accredited JCAHO Facility

Providing Treatment for Today
and Hope for Tomorrow…
FAMILY HANDBOOK

ROCHESTER REGIONAL FORENSIC UNIT
1111 Elmwood Avenue
Rochester, NY 14620

Rochester Regional Forensic Unit delivers treatment based on best practices to the acute mentally ill detainees of the county jails (508), and to chronically mentally ill individuals who are remanded to the facility by the NY State Courts due to competency issues (730), or dangerousness (330.20).

INFORMATION ABOUT THE TREATMENT TEAM

PSYCHIATRIST: Dr._____________ Phone #: ____________
SOCIAL WORKER: ______________ Phone #: ____________
PA: ___________________________ Phone #: ____________
(Program Administrator)

NURSING OFFICE: ______________________________

OTHER: ______________________________

If you are unable to reach a therapist, please call 585-241-1858. Our Secretary will take your message or you will get her voice mail and can leave a message for any of our staff. Thank you.

PROUDLY SERVING PEOPLE SINCE 1984
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RPC Mission

Rochester Psychiatric Center provides integrated evaluation, treatment, and rehabilitation services for people with serious mental illness working toward recovery.

RRFU Mission

The primary mission of RRFU is to provide empirically validated inpatient psychiatric treatment to mentally ill individuals who are currently involved or were involved with the Criminal Justice System. Specifically, the unit provides inpatient psychiatric treatment to:

1) Pretrial or pre-sentenced detainees of county jails (§508 Correction Law)
2) Individuals found not competent to stand trial (§730 Criminal Procedure Law)
3) Individuals found not responsible by reason of mental illness who are currently dangerously mental ill (§330.20 Criminal Procedure Law)

Vision

Rochester Psychiatric Center, a valuable partner in the service delivery network, will improve the treatment of serious mental illness by developing, providing, marketing, and teaching the most effective mental health technologies.
Core Values

- Recipients of RPC services come first.
- Respect recipients of RPC services and their right to make life choices.
- Respect families, staff and environment.
- Take pride in your work and RPC.
- HOPE: Believe that recipients of RPC services and staff can make progress.
- Strive for excellence

WELCOME TO THE ROCHESTER REGIONAL FORENSIC UNIT

Hospitalization in a forensic unit is often a stressful event for both patients and family. It is our hope that this handbook will make your introduction to and involvement in treatment services more productive.

RRFU recognizes that a unique relationship exists among staff, families, and patients. We clearly affirm the necessity and importance of working together to meet the needs of patients and their families. This partnership is an important component in treatment. We also recognize that friends and those who are “significant others” to our patients may indeed form a family. References to family members in this handbook include those who are “family” in the broadest sense.

We hope that this handbook will answer questions that you might have, but we recognize that no handbook can answer all your questions. Therefore, we encourage you to ask for additional information through contact with staff.

GENERAL INFORMATION

The Rochester Psychiatric Center has been a provider of mental health services to the greater Rochester community for over 100 years. As a state-operated psychiatric facility serving the residents of Monroe, Livingston, Wyoming, Orleans, Genesee, Wayne, and Ontario Counties, we are committed to providing specialized intermediate and extended inpatient care as well as a full range of supportive outpatient rehabilitation services. Rochester Psychiatric Center is a fully accredited JCAHO (Joint Commission on Accreditation of Healthcare Organizations) hospital that provides services to all persons without regard to race, color, creed, ethnicity, religion, or ability to pay. The facility is ADA (American Disabilities Act) accessible.

WHERE IS THE ROCHESTER REGIONAL FORENSIC UNIT LOCATED?

RRFU is located on the grounds of the Rochester Psychiatric Center. South and Elmwood Avenues border the center itself.

RRFU is located in Building 60 of the Rochester Psychiatric Center, units F1 and F2.

Visitors to the RRFU enter the Forensic Unit through the F1 Control Room area. Visits
will be held in the first floor of the unit in a large visiting room. See page 8 for further information.

The Forensic Unit houses 55 patients. The first floor consists of a 28-bed sleeping area, dayroom, lunch room, program room, and music room. The second floor has a 27-bed sleeping area, and otherwise is similarly constructed to the first floor area, except that on the second floor there is a large exercise program area. In general, the unit contains multiple program areas for arts and crafts, ceramics, work programs, educational and verbal interaction group rooms, kitchens for teaching cooking skills, weight and exercise areas, music rooms, patient lounge areas with comfortable seating, and a computer skills room. The unit includes a large yard with picnic, gardening, and outdoor game areas, which is easily accessible.

Despite the necessary security on this unit, every effort is made to ensure a therapeutic, clean and safe environment that has as much privacy as possible for patients.

WHY IS A PERSON ADMITTED TO THE FORENSIC UNIT?

On the Forensic Unit, all patients are admitted as involuntary patients reflecting the seriousness and urgent nature of their illness. Families will be contacted, with patient's permission, for input in order to provide the optimal treatment to the individual.

A person is admitted to the Forensic Unit under one of the following sections of New York State Law:

1) 508 Corrections Law (508/CL)

   New York State Corrections Law: Section 508, provides for an inmate to receive mental health treatment when necessary. The staff at the county jail where the inmate is located identifies persons whom they feel are having difficulty handling the jail setting due to psychiatric problems. Once the person is admitted to RRFU from one of the county jails, treatment is undertaken immediately with the goal of stabilizing the person's mental or emotional condition and returning him/her to the jail setting.

2) 730 Criminal Procedure Law (730 CPL)

   Section 730 of the New York State Criminal Procedure Law (NYS CPL) provides for a person to receive mental health treatment for psychiatric conditions that may be interfering with their ability to participate in their defense of criminal charges placed against them. The goal of the law is the treatment of the mental disorder such that they will be able to assist their attorney in their own defense and understand court proceedings adequately. The staff works closely with such persons in order to prepare them for court as soon as possible after their admission.
3) 330.20 Criminal Procedure Law (330.20 CPL)

Section 330.20 of the NYS CPL provides for the mental health treatment of persons who have been found dangerous and not responsible for a crime due to mental illness. The goal of the treatment of persons under Section 330.20 is psychiatric treatment of the mental disorder that led to their criminal behavior. Once the treatment team feels that the patient’s psychiatric condition has been treated to a level that significantly reduces the possibility of future occurrences of criminal behavior, application is made to the court for a transfer to a less restrictive setting. This setting is a civil psychiatric center.

How Will A Person’s Admission To The RRFU Affect His/Her Status As A Person Accused Of A Crime And The Legal Proceedings In Which They Are Involved In Their Own Counties?

1) 508 CL----Legal proceedings continue

If a person has been admitted from a county jail under section 508 Corrections Law, his/her admission will not interfere with the legal process which has begun in their own county. He or she will be transported to the court as scheduled by the sheriff of his or her county. If a person is released from sheriff's custody, the staff at the RRFU will assist in making arrangements for the person to receive proper psychiatric care in their own community.

2) 730 CPL----Legal proceedings stop

For persons admitted to the RRFU under section 730 of the Criminal Procedure Law, all proceedings stop until the person is referred back to court and is found competent to proceed by the judge.

3) 330.20 CPL ---- Legal proceedings have ended with the judgment of Not Responsible by Reason of Mental Disease or Defect. For persons admitted under section 330.20 of the Criminal Procedure Law, the legal proceedings against them have ended. The person, however, continues to be subject to the provisions of section 330.20 of the Criminal Procedure Law.

SECURITY RULES AT THE ROCHESTER REGIONAL FORENSIC UNIT

As a visitor to the RRFU, you will observe and be part of the security/safety process. For example, there are security fences and cameras that surround the unit. The deputies and safety officers are on duty in the control room and you will be cleared through a metal detector as you enter. Additionally, any packages brought in will be checked by the officers. However, every effort has been made to make the living and treatment areas as much like any other inpatient treatment setting as possible.
VISITING GUIDELINES

- Visiting by family and friends is encouraged. When your family member is first admitted, it is suggested that you consult with members of the treatment team as to the length and frequency of visits.

- It is important to understand that there are times when visiting by family members and others may be restricted for clinical reasons. Also, there will be times when a patient may refuse to receive visitors. These situations should be discussed with members of the treatment team.

VISITING HOURS:

<table>
<thead>
<tr>
<th>Days</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>MONDAY TO FRIDAY</td>
<td>6:00 PM TO 8:00 PM</td>
</tr>
<tr>
<td>SATURDAY &amp; SUNDAY</td>
<td>1:00 PM TO 4:30 PM</td>
</tr>
<tr>
<td>CHRISTMAS DAY and THANKSGIVING</td>
<td>1:00 PM TO 4:30 PM</td>
</tr>
<tr>
<td></td>
<td>6:00 PM TO 8:00 PM</td>
</tr>
</tbody>
</table>

(RARE EXCEPTIONS TO THESE HOURS MAY BE PERMITTED ON REQUEST AND WITH PERMISSION FROM THE PSYCHIATRIST OR SOCIAL WORKER)

There is a limit of 3 people who can visit at any one time. This is necessary for security purposes. If you are planning a special visit where more than 3 people would be attending, please contact the assigned Social Worker for prior approval.

All visitors must have two forms of identification to be shown before entering the unit. All purses, etc should be left in cars off the unit. We do have available small lockers with keys if you prefer to lock items prior to entering the unit. The entire hospital is non-smoking. Please limit the number of visitors to three. If the number of visitors exceeds the capacity of the visiting area, individuals will be requested to shorten their stay to accommodate new arrivals. Visiting will not be allowed if those visiting seem intoxicated. Visits will be terminated if conduct is inappropriate; for example, arguing or continual touching and kissing.

There are no restrictions as to the age of the visitor. Children 14 and younger must be accompanied by an adult who is responsible for them.

Visiting privileges may be suspended if articles are brought in without permission, if individuals are intoxicated, and/or if disorderly conduct occurs.

With prior approval visitors may bring the following items for patients: Books, Magazines, Clothes

Money/Checks - to be given to staff and deposited in patient’s account. A receipt will be given for all checks and cash or money orders.
These items will remain with staff and will be brought to the ward. Please speak to assigned Social Worker for items not addressed.

**GIFTS/CLOTHING**

Please be aware that all items (clothing or otherwise) must receive prior approval through the assigned Social Worker. Unapproved items will be returned.

Family may bring in food for the patient to eat during the visiting time. There is a microwave in the visitor's room available for your use. (Please keep this clean). Food items must be brought in plastic/paper containers. (Plastic silverware please.) No food can be taken back to the ward, so leftovers must be taken home or discarded. **Aluminum foil and glass/metal containers are not allowed.** Any visitor who fails to comply with these guidelines or causes a disruption may be asked to leave the premises. In extreme situations, visitors may be banned from the hospital grounds.

**PARKING**

Parking is available near the main building. Please observe all parking and traffic regulations.

**HANDICAP ACCESSIBILITY**

Handicap parking is available in the parking lot across from the Forensic Unit. For wheelchair accessibility or for those who need other accommodations, please contact the social worker assigned to your family member.

**We welcome contact from families and encourage visits.** If you have any concerns about your visit or just want to share your impressions with staff after your visit, we encourage you to do so. The facility phone number is (585) 241-1200; ask for the person with whom you wish to speak.

**SMOKING**

RRFU is a smoke-free environment. Smoking/tobacco use is not permitted.

**SIGNATURES/LEGAL DOCUMENTS**

Families seeking a patient’s signature on a legal document should first contact the assigned social worker. Service of legal documents to a patient must be cleared through the Clinical Director’s Office. Documents to be served must be accompanied by a court order.

**A NOTE ON CONFIDENTIALITY**

The New York State Health Insurance Portability and Accountability Act (HIPAA) strictly
controls the release of confidential information to persons who are not employees of the New York State Office of Mental Health. Generally, such information cannot be disclosed to families or significant others without the consent of both the patient and RRFU, however, the law provides several exceptions.

Confidential information must be released upon the demand of:

- A judge of court of record
- The Mental Hygiene Legal Services
- Attorneys representing patients in mental health legal proceedings
- The New York State Commission on Quality of Care for the Mentally Disabled

In addition, RRFU may disclose specific confidential information without the consent of the patient to:

- Government agencies and insurance companies that make payment to or on behalf of patients
- Government agencies in connection with criminal justice investigations
- Child abuse reporting authorities when allegations of child abuse have been made
- Government agencies and other agencies needing information to locate missing persons or to prevent imminent serious physical harm to the patient or other persons
- Danger to third party
- Mental Hygiene Law also allows for best interest information sharing among Office of Mental Health facilities

ADMISSION PROCEDURE

This procedure is for all patients being admitted to the unit.

Initially, if the patient's behavior allows, they meet with nursing staff to allow for a decrease in anxiety about being in an unfamiliar location. A thorough medical exam is completed within the next 24 hours. Follow up medical procedures will be completed as needed. Physicians are available on a 24-hour basis, and if necessary, referral to a general hospital is utilized. Photograph and fingerprints are also obtained.

The patient showers and is provided with clean clothing and necessary personal items. Items the patient brought with him/her are recorded. Some items will be sent to the ward with the patient and other items will be stored. The patient is responsible for any items he/she takes to the ward.

At this point a psychiatrist will complete the admitting psychiatric exam. The patient is then brought upstairs to the unit and assigned a bed and a locker. He/she is introduced to the staff and provided with an orientation to the unit.

TREATMENT AND REHABILITATION TEAM MEMBERS
Your family member's care while at the RRFU is the responsibility of the administrative staff and the treatment team. There are many different staff members on the treatment team, each with specific responsibilities. The following information will help you understand the various staff members role and their responsibilities.

Chief of Service-- The C.O.S. is responsible for the overall administration of the unit and insures that patient's are receiving the highest level of care possible. This includes ensuring an adequate number of trained staff and budget to meet the program goals and maintain a safe and therapeutic environment.

Program Administrator— The P.A. is responsible for their program and the assigned staff. The PA is the direct line supervisor. You should feel free to contact them and discuss any concerns you might have.

Psychiatrist - Each patient is assigned to one psychiatrist during his or her stay on the Forensic Unit. The psychiatrist is involved in all decisions pertaining to your family member's treatment. The psychiatrist interviews and evaluates the patients in order to determine what their problems may be and the type of treatment that will be provided. The psychiatrist is responsible for orchestrating the treatment planning process, ordering medications as needed, evaluating the patient's response to treatment, and deciding when the patient will be ready for discharge.

Medical Physician - The medical doctor is responsible for your family member's physical health care during their stay on the Forensic unit. The psychiatrist and the medical physician work closely together to deal with all medical concerns.

Dentist - A certified dentist is on staff and patients are provided with both routine and emergency dental care. If specialized dental care is needed, referrals are made to Eastman Dental Center for evaluation and care.

Social Worker - The social worker has special training and expertise in helping your family member deal with psychiatric problems as well as casework issues. Social workers on this unit have expertise in providing treatment in the areas of psychotherapy, family, individual and group psychoeducation, and casework management. Questions and concerns regarding your family member's care and treatment on the unit are areas in which the social worker can provide assistance/direction.

Psychologist - The psychologist has special training and expertise in evaluating psychiatric problems and conflicts. In connection with this evaluation, your family member may be asked to cooperate with various types of psychological tests. The psychologist also specializes in helping people learn better ways of coping with difficulties through individual and group therapy modalities. The psychologist is responsible for managing the behavior system in the unit.

Recreation Therapists - As a member of your family's treatment team, recreation therapists are trained to provide recreation and leisure opportunities for your family
members which encourage healthy alternatives to substance abuse and social difficulties that have been patterns in their past.

Rehabilitation Counselor - This staff is trained in vocational counseling and psychiatric rehabilitation. Your family member will be offered opportunities to work. The wage is a sheltered wage and is paid to their accounts.

Occupational Therapist - This staff is trained in providing psychiatric and physical rehabilitation services to increase independence. OT’s also provide vocational training and counseling.

Nurse - The nurse initially identifies the needs of the patient on a holistic level, psychosocial, medical, legal and spiritual at the point of admission, utilizing assessment skills and assists in developing a partial treatment plan. From that point on, the nurse works not only as part of the "team approach", but also approaches assigned patients with evidence based therapy to assist them in achieving their goals towards wellness and the ability to be discharged from this unit. The nurse manages the expectations of patients care in coordination with the treatment team, facilitating this care in the most humane and respectful manner, recognizing each patient is an individual with unique needs and desires. The nurse instructs, supervises and evaluates care given by the Security Hospital Treatment Assistants.

Secure Hospital Treatment Assistants - These staff members are closely involved with the patients in meeting their personal daily needs. They maintain the security and safety of the unit, assist with patient transports, and are readily available for questions and concerns. They help patients with clothing needs, personal care, telephone calls, and the many other daily needs that the patients may have. They are readily available to patients who need company and want to sit and talk or play a game of cards or pool. The SHTA’s observe patients 24 hours a day, 7 days a week, and alert other staff to important issues that need consideration.

THERAPEUTIC PROGRAMMING

Allied Rehabilitation Services include Recreation Therapy, Rehabilitation, and Occupational Therapy staff. These clinicians offer a variety of activities to our patients. When patients first come to the unit, they are encouraged to participate in programs of their choice, as well as those recommended by the treatment team. Behavioral control and level of functioning will determine which activities may be available.

The craft room is open several times a week and offers an opportunity for patients to express their creative talents. A variety of projects are available. As projects are completed, patients are encouraged to give or mail them to family and friends.

The kitchen offers an excellent opportunity to develop cooking skills as well as make goodies to be used as group refreshments or holiday treats. Patients on Level 3 plan and prepare lunch once a month.
The game room offers a ping-pong table, a pool table, table games, and cards. There is a music room and lounge available with TV, stereo, and computer access. Patients must reach an acceptable level of the Unit Behavioral System to access the Music Room and Lounge.

In the summer months, many of the programs are moved outside. Even in the cold months, patients are given the opportunity to participate in outdoor activities.

All clinical staff implement Psycho-Educational programming. These programs include groups such as Basic Conversation, Personal Growth, Medication Management, Symptom Management, CALM, Understanding Mental Illness, and Anger Management. Patients are referred to programs such as these in an effort to provide optimal treatment focused on individual needs.

**Work Program**

An extensive work program provides an opportunity for patients to learn work skills and earn money. Patients are required to have a social security card or birth certificate to be involved in the work program. A variety of jobs are available on the unit to patients on long-term status who desire and are able to handle a work experience, including Work for Pay and Landmark On Unit Work program (LOUP). Those patients with furlough privileges have an opportunity to work at Landmark, which is a supervised sheltered workshop on grounds.

**PATIENT DAILY SCHEDULE**

A general outline of daily activities is as follows: On weekdays, patients rise at 7:30am, medications are administered per M.D. order, and after meals therapeutic activities are offered. These vary according to the patient’s individual treatment plan. On weekends, the schedule varies; however, therapeutic activities continue to be provided.

**PATIENT PRIVILEGES**

To help patients build skills and confidence, we have a system of privileges which give graduated levels of independence and very clear expectations of behavior.

The following information will help you understand the system of privileging at RRFU. If you have any questions, please speak with the treatment staff. Your cooperation and understanding are welcomed.

In March 2003, RRFU implemented a new behavior development program for our chronically and seriously mentally ill forensic population, which is called the Psycho-Educational Program (PEP). The PEP System is made up of four levels. Level I, Level II, Level III, and the Intensive Treatment Level (ITL). Advancement from Level I to II to III indicates treatment progress and gives the patient access to an increasing number of privileges and responsibilities. Each patient admitted to the UNIT must meet the specific
criteria of each level prior to advancing to the next level. For each level the patient achieves a certain amount of points each day depending on their behavior.

ITL is a highly structured system used when a patient engages in severe, problematic behavior. It is designed to provide the patient with a higher number of intensive therapeutic interactions intended to help the patient evaluate their past behavior and come up with new prosocial ways to deal with their issues. The ITL level also imposes some additional restrictions which help give the patient additional structure and supervision needed to guide them as they learn and try out new skills.

**DISCHARGE PLANNING**

Discharge plans are made by the patient and his/her treatment team. Depending on the legal status, he/she may be discharged back to the county jail, to a non-secure psychiatric hospital operated by the State, or to the community.

**ROLE OF THE FAMILY**

Family members are encouraged to provide information regarding the patient’s history to the treatment team at any time. Your insight will be very helpful to the staff in understanding the patient and in developing an ongoing course of treatment.

Unfortunately, due to HIPAA regulations, we are not able to share patient information with families without the patient’s permission. Families and friends are often more sensitive to behavioral changes in patients than staff. Families and friends should alert staff if they observe changes in behavior.

Family education groups are available for the families and friends of RRFU patients. For more information, contact your family member’s social worker.

NAMI Rochester (National Alliance for the Mentally Ill) is a local organization that provides education and support to family members, friends, and people with mental illness. For more information about NAMI in the Rochester/Monroe County area call: (585) 423-1593. For information outside of Monroe County, call 1-800-950-6264.

If you have any questions at any time, please feel free to contact any member of the treatment team.
PATIENT CONCERNS

PASTORIAL CARE SERVICES

Representatives of all faith traditions are available to our patients and their families. Individual spiritual counseling, pastoral care and religious services are available. These are provided weekly and/or on patient request. Arrangements are made through the team and chaplain. Your clergyman is encouraged to visit.

PATIENT FUNDS

Patients are not allowed to have money on their person. Funds may be given to the unit's officers; you will be given a receipt. The funds will be placed in a safe until the treatment unit clerk records the amount of money received, gives the patient a receipt showing how much money was deposited in his/her account. The money is taken to the business office in Building 60 where it is deposited in the patient's account. Please note that money deposited by check is not available until the check has cleared the bank. The patient may then access this account with help of the social worker. Upon discharge, this money is withdrawn and forwarded to patient’s new address.

USE OF THE TELEPHONE

All patients are encouraged to maintain contact with family, friends, and attorneys.

Unless individually restricted in accordance with RPC policy, the Mental Hygiene Law, and 14 NYCRR Part 527, all patients must be allowed to make and receive telephone calls to and from family, friends, and lawyers (provided, however, that communications with legal representatives cannot be restricted) any time between the hours of 9:30am and 10:00pm. If a patient is not able to make long distance calls due to a lack of funds, special arrangements can be made to facilitate these calls through the patient’s Primary Therapist or Social Worker with treatment team approval.

MAIL

Patients are allowed to correspond with anyone unless stipulated otherwise by an Order of Protection. Mail is not censored. Incoming mail must be opened in the presence of staff members in order to check for possible contraband. Patients are allowed to seal outgoing mail and it is not to be read or opened by staff. Patients are allowed up to six letters per week postage free. Patients are responsible for postage on ALL outgoing packages.

The unit supplies stationary, safety pens and postage. Additional postage is available for sale in the commissary.

When patients receive money or checks in the mail, it is given to ward staff. Ward staff, in turn, gives it to the unit clerk so that it may be deposited into the appropriate patient’s
account at the patients' cash office. A receipt is provided for the patient showing the amount received.

**COMMISSARY**

Patients may purchase a variety of personal and snack items. The commissary is managed by an outside agency and a list is provided from which patients can order. The decision to purchase items from the commissary is strictly voluntary.

**CONTRABAND**

The following are items not allowed on the Forensic Unit. Staff, patients, or visitors cannot bring them in. The purpose of this list is to insure that each patient on the unit receives necessary care and treatment in a safe and secure environment.

**CONTRABAND LIST**

This is a partial list. Staff may choose other items to include in the interest of safety and security.

- Guns or weapons of any kind.
- Knives, Plastic, Metal
- Lighters, matches or other flammables, aerosols.
- Tools, hammers, screwdrivers, pliers, files
- Rope, string, twine, chains, razor blades
- Keys
- Pagers, cell phones, laptops, tape recorders, digital recorders
- Pens, pencils, crayons, markers, paper clips, spiral bound notebooks
- Cameras, photographic, digital, video equipment.
- Walkman radio/tape or CD players or anything with cords/batteries or headphones except as permitted by team approval according to ward policy.
- Narcotics, alcohol, tobacco products
- Metal, cans, containers, aluminum foil, plastic foil, glass, bottles, can openers, plastic bags, mirrors
- Gum, taffy
- Open drink containers, small juice boxes with hard straws
- Money
- Pins, needles
- Hard plastic cards such as credit or phone cards (Downstairs patients can keep phone cards).
- Coat hangers
- Sunglasses will be worn only when patients are outside during ward activities or on trips; prescription glasses/sunglasses are allowed as per MD direction.
- Unapproved belts, suspenders, neckties, scarves
- Pantyhose, knee-highs, socks other than ankle height
Steel toed shoes or boots or shoes/boots heavy enough to be used as a weapon
Hairpins, curlers, curling irons, hair dryers, irons etc.
Shoelaces more than 6" long
Clothes with excessive buckles
Clothing or accessories with drawstrings – if patient approves, drawstrings may be removed and clothing used on unit.
Unapproved jewelry
Watches other than non-metal types without tri-fold metal clasps and as per ward policy
“Do rags”, bandanas, sweat bands, etc.
Dental floss
Personal grooming products other than those available through the unit or commissary unless specifically ordered
More than 3 rubber bands for hair
Jackets cannot be worn to group on the unit – bulky jackets may not be worn in the day room.
Medications, prescribed and over the counter, including inhalants

JEWELRY POLICY

New admissions: Every patient will surrender all jewelry except flat wedding bands. Rings that cannot be removed will be reviewed and the team will decide on the action (cutting the ring off or allowing it). Body piercing jewelry is not allowed and will be removed.

Level II: Patients may have a plain, small watch with non-metal band (no flat, tri-fold metal clasps).

Level III and with approval: Patients may have: One necklace (thin, breakable, short chain with a small medallion, no larger than a nickel; one pair of stud earrings; one plain belt with small buckle).

Each patient will have an inventory sheet noting which of the above items he/she has on the unit. Patients must sign a waiver regarding RPC responsibility for any items kept on the unit.

Patients may have only one of each item, i.e., not a supply that they make exchanges from. When there is doubt, the Nurse Administrator, Program Administrator, or Chief of Service can review jewelry items for approval.

Number of CD’s and cassette tapes patients can keep on the unit:

Upstairs Unit:
CD’s – 5 – which will be kept locked in the Level III lounge.
Cassettes – 5 – which will be kept in the music room.
Downstairs:
CD’s – 25
Cassettes – 25

To be kept in the music room or in patient’s individual bins in the day room.

This does not mean that staff will rotate items to and from the basement.

RPC is not responsible for lost, stolen or damaged property. Patients will have to sign a waiver regarding this when property is brought onto the unit.

PATIENT RIGHTS

All patients receive a list of their rights during the admission process. Some of the most important of these rights are listed below. A more detailed description is contained in a separate handbook which your relative received upon admission. This booklet is entitled, “The Rights of Inpatients in New York State Office of Mental Health Psychiatric Centers.” The rights of inpatients are also posted on the unit.

All patients at Rochester Psychiatric Center have the right to:

- Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, or source of payment

- Be informed of the type of admission and of their right to appeal any aspect of their hospitalization. They have the right to the services of the Mental Hygiene Legal Service which is free and is not part of the Rochester Psychiatric Center (for more detailed information, please refer to the MHLS Section)

- Be informed of the name, position, and function of all staff involved in their treatment

- Receive complete information about diagnosis, treatment and prognosis, and to be informed of the risks, side effects, and benefits of all medications and treatment procedures used

- Receive individualized treatment which will be developed with the patient and where appropriate with family and significant others

- Receive all information that is needed to give informed consent for any proposed procedure or treatment. This information shall include the proposed risks and benefits of the procedure or treatment

- The right to confidentiality in medical records. No information can be given out about the patient without his or her written permission
- The right to refuse specific medications or treatment procedures unless a judge grants a “treatment over objection” order

- Family members and friends shall be allowed to visit unless the visits are clinically contraindicated. This clinical rationale will be documented and communicated to the patient and family members

- Each patient has the right to refuse visitors and that right must be respected

- Some additional rights include: unopened mail, voting, privacy, phone calls, religious practice and pastoral care services, access to spending money, personal clothing and special consults, and treatment according to the needs of the patient

- The right to complete advanced directives such as a health care proxy or a living will with the assistance of Mental Hygiene Legal Service representative

MENTAL HYGIENE LEGAL SERVICES (MHLS)

The law protects patients’ legal rights, including the right to confidentiality. The attorney of record, or the attorney appointed by the court, is free to visit the patient as necessary. Patients have the right to make legal telephone calls and the treatment team makes arrangements for such calls as quickly and often as needed.

The Mental Hygiene Legal Service is a state agency responsible for informing patients of their rights. Patients have telephone access to attorneys in this agency and the MHLS attorneys are allowed to visit as necessary. MHLS can, and will, handle questions pertaining to appealing a patient’s hospitalization, complaints in regard to treatment (including allegations of abuse), and the right to refuse treatment. The MHLS attorney will not assist with the criminal defense.

The address and telephone number for the Mental Hygiene Legal Service is:

50 East Ave., Suite 402
Rochester, N.Y. 14604
(585) 530-3050

BOARD OF VISITORS

Should you still have concerns after discussion with your family member’s treatment team, please contact a member of the Board of Visitors. Telephone numbers are posted on the unit or call the Executive Director’s Office for this information at (585) 241-1594. There is also a formal grievance procedure that may be used if you are dissatisfied with the way in which your concerns have been handled.
QUALITY OF CARE IN A SAFE ENVIRONMENT

RRFU is committed to providing a safe and secure therapeutic environment that promotes recovery. The safety of our patients is our first priority. Systems are in place to proactively identify, evaluate, and minimize any safety risks to patients, staff, and visitors and to identify and eliminate errors. We also welcome family member’s input and suggestions for improving safety and reducing risks.

Our goal is to provide a nonviolent environment where patients can heal and recover. Creating and maintaining an environment that promotes the empowerment of patients and families and teaches anger management and problem solving supports this goal.

There are times, however, when psychiatric emergencies arise, and we find it necessary to use restraint or seclusion to control dangerous behavior and prevent injuries to self or others. Restraint is defined as a physical, mechanical, or pharmacologic measure, which restricts an individual’s movement of head, limbs, or body. Seclusion is the placement of a person alone in a room or area from which he/she cannot leave at will.

Our policy is to employ restraint or seclusion only when necessary to prevent a patient from seriously injuring self or others. These techniques are only to be used if less restrictive techniques have been clinically determined to be inappropriate or insufficient to avoid injury. Staff has been trained in the safe application of these procedures.

In an emergency, restraint or seclusion may be used with your relative. If a physician is not there at the time of the incident, one will be called immediately and report to the scene, examine the patient and determine if it is necessary to continue the intervention. Nursing staff will carefully monitor your relative during the application of the restraint or seclusion, and they will be used only for as long as absolutely necessary.

We are committed to reducing the use of restraint and seclusion and we monitor each episode looking for ways to prevent such occurrences in the future. Patients are asked to help us learn ways to work with them to avoid restraint and seclusion.

If you have any thoughts about what strategies or techniques might work best with your relative when they feel themselves losing control, please share these with the treatment team.

RRFU makes every attempt to avoid use of both restraint and seclusion.

MONITORING QUALITY OF CARE

RRFU is committed to providing the best possible treatment for your relative. Helping us achieve our goals are two groups who have the responsibility of monitoring the services we provide:
Rochester Psychiatric Center Board of Visitors
Members of the Board are appointed by the Governor. They meet with the Executive Director and other members of the facility Administration to review and discuss the status of operations and address areas of concern. Board members frequently discuss the concerns of our patients, family members, and friends with the hospital directors. The names, addresses, and telephone numbers of Board members are posted on all units.

New York State Commission on Quality of Care for the Mentally Disabled
This statewide oversight agency is often referred to as simply CQC. It is empowered by the State legislature to monitor the care provided in all state psychiatric centers. Members can visit and inspect facilities, hear patient concerns, investigate unusual incidents, and report the findings to the public. This office is located in Albany, and can be reached by telephone: 1-800-624-4143.

Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
To contact JCAHO or express concern about this organization, call 1-800-994-6610 or e-mail complaint@jcaho.org

COST OF CARE
The office of Patient Resources is a separate state office responsible for managing the financial aspects of the patients’ hospitalization here. If there are questions about the cost of care, this office may be contacted:
  Monday - Friday
  9:00 a.m. - 4:00 p.m.
  Telephone: 1-800-881-5439

FAMILY EDUCATION AND SUPPORT GROUPS
In addition to the individualized support services offered by the hospital staff, there are a number of both hospital and community-based support groups that can be valuable sources of information and assistance to families and friends of our patients. For more information, contact your family member’s Social Worker.

National Alliance for the Mentally Ill Rochester (NAMI) is a support and advocacy group which provides education and support to individuals and families affected by mental illness. NAMI also works to eliminate the stigma of mental illness and promote better community understanding and acceptance. For more information, call 423-1593. Outside of Monroe County, call 1-800-950-6264.

The Mental Health Association of Rochester and Monroe County is dedicated to the promotion of mental health, the prevention of mental illness, and quality treatment and rehabilitation services for those with mental illness. The association sponsors education programs, supports advocacy and social action, and provides up-to-date information on mental health.
Rochester Psychiatric Center Family Education Programs are held at Rochester Psychiatric Center. The programs provide current information on such topics as medications, serious mental illness, coping skills for family members, and discharge planning.

RPC/RRFU also collaborates with the local NAMI group to hold in-depth educational seminars twice a year.

Rochester Psychiatric Center Family Advisory Council is made up of family members and Rochester Psychiatric Center staff who meet monthly to share information and discuss hospital programs and policies.

The Friends of Rochester Psychiatric Center, Inc. is a volunteer group that supports many special programs and activities designed to enhance the quality of life for our patients. The Friends operate the hospital gift shop. The Friends welcome the involvement of family members and friends in their activities. They can be contacted through the Rochester Psychiatric Center Volunteer Office.

The Rochester Psychiatric Center Peer Advocacy Program provides patients with an opportunity to engage in problem solving and mediation as they voice their concerns regarding any matter affecting their care and treatment at Rochester Psychiatric Center. A team of trained peer advocates – serving as role models – work with patients to achieve a satisfactory outcome to a specific issue. Family members are welcome to contact the Peer Advocacy Program to learn more about their services.

For further information on any of these groups, please contact your team social worker.

HELPFUL WEBSITES

Websites:

The National Alliance for the Mentally Ill (NAMI), a website with links to helpful sites [http://www.nami.org](http://www.nami.org)

Mental Health Association in New York State [http://www.mhanys.org](http://www.mhanys.org)

Knowledge Exchange Network [http://www.mentalhealth.org](http://www.mentalhealth.org)

Recommended readings can be obtained from the patient’s treatment team.