Welcome to Fairmount Behavioral Health System. We are glad that you have come to us to get help dealing with difficulties you are having and we look forward to working with you on your goals. This handbook contains general information and guidelines that will orient you to the hospital. We know that your decision to enter your child in treatment was not easy to make. Our goal is to provide an environment in which your problems and concerns can be addressed so that you can begin making changes in your child’s life as well as your own. We believe this can be accomplished with a structured, consistent treatment program. Please refer to this handbook or feel free to talk to our staff about any questions you may have during your stay in the hospital.

Fairmount’s goal is to provide a positive and safe treatment experience for all patients. We look to our patients and their families to partner with us in achieving this goal. It is important that you work with the treatment team on a plan of care and that you understand and all steps in that plan.

Many parents find it useful to write down important information during treatment. Your health is too important to not understand or to not remember information you have been given. Please do not hesitate to bring questions or concerns to any member of the treatment team. Your child’s social worker will be assigned the morning of the first weekday after admission to Fairmount. The social worker will then contact you on that day. You will have easy access to your child’s social worker in order to have your questions/concerns addressed throughout your child’s hospitalization.
Admission to the Hospital...

At the beginning of your child's stay, he/she will be assigned a team of highly qualified professionals including a psychiatrist, nurses, social worker, allied therapist, and other mental health professionals. Your treatment team includes:

Doctor:

Program Director:

Unit Coordinator:

You will be on the following unit:

If you have any questions or concerns they should be addressed with the social worker or the charge nurse. You will have the opportunity to meet weekly with the social worker in order for you to be an active part of the treatment process.

Assessment and Treatment Planning...

Your child's treatment will begin with a thorough examination of the problems and concerns you and your child are experiencing. Please be honest, open, and direct during your assessments and encourage your child to do the same. Laboratory testing will usually be necessary for your child's medical care and will usually require blood work to be drawn the first morning after admission. Be aware that specimens must be collected in the morning before breakfast. Please let us know if your child has a fear of needles.

Following an initial evaluation, your child's treatment team will meet to set goals and formulate your child's Master Treatment Plan. Your input is needed in this process and will be appreciated. If you have questions or concerns about your treatment plan, talk to any member of your treatment team.

Treatment Program...

The treatment program is specially designed to meet your child's needs. Your child is strongly encouraged to be on time and participate in all activities in order to get the most out of their stay. There are approximately four to five hours of active treatment each day. Your child will participate in Community Meetings, meet with members of your treatment team, and be involved in other assessments and treatment activities as clinically indicated. Below are descriptions of some of the activities offered:
Community Meetings

Community Meetings are held twice daily. The purpose of the morning meeting is to review community rules, group participation, and scheduled activities as well as to set daily goals. The second meeting is held in the evening to review the goals for the day and discuss goals for the following day and any concerns of the community.

Group Therapy

Group Therapy has a number of purposes: to work on specific treatment goals, engage your child in the therapeutic process, and encourage your child to continue therapeutic work after discharge. Group Therapy allows members of the group to work on similar issues at the same time and receive support. It is a safe place to try out new behaviors. Group Therapy is goal-directed, concentrated in the present, builds on strengths and focuses on solutions. It can help your child change how he/she thinks, feels, and what they do when confronted by their issues.

Educational Groups

Education groups on numerous topics are also offered. These classes or groups involve discussion of specific topics, exercises, and session assignments. Examples of some of the groups held include:

Illness Education – Provides information about various disorders, biomedical causes, symptoms, course of illness, treatment modalities, and relapse prevention.

Medication Education – Focuses on specific medications, benefits of taking medication, how your child should take their medications, recognizing and coping with side effects, how to talk with the doctor, and treatment of various disorders.

Healthy Lifestyles – Offers information about daily skills, healthy relationships, and leisure activities.

Discharge Planning – Includes recognizing feelings and problems associated with your child’s discharge, setting goals for continuing care, developing action plans, following treatment recommendations, continuing to build skills developed while in treatment, and specific steps to take in a crisis or relapse.
Communication – Provides training in basic communication skills, such as how to ask questions, assertive as opposed to aggressive behavior, dealing with difficult people, and words to avoid.

Anger Management – Teaches your child about anger and helps your child acquire appropriate coping skills.

Stress Management – Focuses on stress and how to cope with it.

Relaxation Group – Shows how to relax and allows your child to practice various methods.

Allied Therapy

The purpose of Allied Therapy is to help meet the specific therapeutic goals of your child through a variety of therapeutic activities. Your child will learn how to solve problems, increase self-awareness, express negative feelings in appropriate ways, reduce anxiety, enhance attention and concentration, and improve interpersonal skills. Modalities may include art therapy, exercise, relaxation training, occupational rehabilitation, and recreation/leisure education.

Individual Consultation, Family Therapy, and Other Services

Individual consultation is provided by your child’s physician and other members of the treatment team, as needed. In consideration of the brief treatment focus of hospitalization, intensive individual psychotherapy is usually not provided. Family therapy is provided weekly.

Positive Reinforcement and the Level System

Fairmount provides treatment that focuses upon positively reinforcing or rewarding appropriate or positive behavior. Positive behaviors include being completely honest, actively participating and using your child’s time wisely, following directions and rules, being responsible, keeping your child and others safe, and showing respect for others and their property. Your child will receive many types of reinforcement for positive behavior such as praise, recognition, and privileges. Your child will also get opportunities to change inappropriate or negative behaviors. If your child shows negative behaviors, staff may give your child verbal redirection, set limits, suspend certain privileges or activities, or suggest that your child take a voluntary time out. Doing this will help your child calm down and change their behavior.
Your child will move through a level system during your stay at Fairmount. Our levels (or colors) allow your child to move up or down. Your child will get to earn privileges and responsibilities as your child moves up from one color to another. However, if your child shows negative behavior, your child may move down to another color or level, moving down a color occurs only for specific negative behaviors. The basic program is very simple and based on giving the patient as much feedback as possible. If your child simply follows the rules they will earn their points. If they do not follow the rules they do not earn points. Once a point is earned it is theirs. Here is a brief description of the levels:

**Orange Level:** All new patients enter the hospital on the orange level. Responsibilities on this level include completing the orientation to the program, working on other assignments, attending groups, and being in your room during quiet times and for bedtime. Patients on this level must stay in the common areas of the pod during the day, but may leave the unit for school and scheduled gym times.

Yellow level can be purchased by patients on Orange level who earn the appropriate number of points.

**Yellow Level:** Patients on this color may eat in the main dining room and go to the blacktop in addition to Orange level privileges. Patients who require close observation (level 1) because of behaviors that might be dangerous to themselves or others cannot advance beyond Yellow level.

Blue level can be purchased by patients on Yellow level who earn the appropriate number of points.

**Blue Level:** Phone time on this level is increased to 10 minutes per shift. You may also help staff run certain groups during the day. Patients on this level can also spend free time in the dining area of the unit if their doctor has not placed them on close observation (level 2) because of behaviors that might be dangerous to themselves or others. Patients who are on a level 2 cannot advance beyond Blue level.

Green level may be purchased by patients on Blue level who earn the appropriate number of points.

**Green Level:** Patients on this level may participate in the Green level activity on Sunday night and during the week. They may also request off unit visits with family and may be eligible for home passes. Patients may dial their own phone numbers when making calls.
Patients must maintain a certain number of points each day to maintain a color. The number of points needed varies with the age of the patient and the color that they buy or maintain. If a patient drops a color, he or she must stay on that color for a minimum of 1 shift. Colors are advanced only at point store which occurs at specific times for each age group.

**Red Level:**

Patients who have attempted to run away from the hospital or have assaulted another person or have created a situation that could endanger themselves or others are placed on Red level. On this level, the patient must stay in the common areas of the pod or unit except at bedtime. A patient on red may purchase orange level by earning an appropriate number of points for a specific period of time depending on why they were placed on red level. Because safety is our goal we treat assault very seriously. It takes longer to buy orange level after a patient assaults someone than it does someone who tried to run away.

**How do I earn points???

Each patient will have the opportunity to earn up to 10 points each hour from 7:00 AM to 10:00 PM each day. The points can be earned for the following:

- 2 points for appropriate dress and grooming
- 2 points for attending the scheduled group or activity
- 3 points for participating appropriately in the group or activity
- 3 points for having appropriate, polite behavior.

During room checks at 9:00 AM and at 5:00 PM, you can earn up to 10 points for a neat, orderly room.

You can earn 5 points per hour by being quiet and in your room from 10:00 PM to 7:00 AM.

Patients who have not earned points may buy them one point at a time by helping staff. This must be agreed upon in advance between the patient and the staff. No more than 10 extra points may be earned each day.

**School Program...**
Your child will participate in the school program while you are in the hospital. School is held for one hour each day and each child will be given an additional hour of assignments at their ability level to be completed. Our teacher will help develop a personal education plan based on your child’s needs after talking with your home school teacher. Depending upon your child’s situation, this personal plan may involve regular homework make-up assignments, etc.

**Family Involvement and Support...**

It is important that your parents or guardians participate in your treatment while you are in the hospital. They will be asked to be involved in your assessment, treatment planning and discharge planning. Your Social Worker will schedule at least one Family Meeting a week to help you and your family listen, talk to, and get along better with each other.

In your first family meeting with the Social Worker you will be given information about a new service provided by Fairmount Behavioral Health. It is called Family Involvement and it is designed to help the families understand their child’s disease, medications and how to interact more positively with their child when they return home. This program is run by a therapist and it is scheduled around visiting hours so families can attend the group when they are already here. This family group therapy can be used as often as you like and remains available to the parents even after your child has been discharged. It is our goal to offer enough knowledge and support to the families that we will have fewer children come back to the hospital.

**Pain Management...**

Pain management is an integral part of the treatment process. As a patient in this hospital, you can expect:

- A pain assessment and information about pain and pain relief measures.
- Staff who are committed to pain prevention and management and respond quickly to reports of pain. Your child’s report of pain will be addressed and monitored by medical and nursing personnel.

**Medications...**

Only medications ordered by our physician are to be taken while your child is a patient. Medications will be dispensed by the nurse. Regular medication times will be posted on the unit.
If you brought any medications to the hospital, they must be checked at the nursing station. They will be stored until time of discharge, sent home with a family member, or upon special physician order, may be continued throughout your child’s stay.

Confidentiality...

The confidentiality of patient information is very important. Fairmount Behavioral Health System makes a sincere effort to guard the confidentiality of patient information. We follow all applicable laws and regulations regarding confidentiality. You and your child are asked to never talk about other patients (i.e., who they are, what their problems are, etc.) The only exceptions to talking about other patients are in groups with those patients or to a staff member in case of an emergency. During your child’s inpatient stay, the child is also asked to respect the privacy of other patients by not going into their rooms.

Patient Rules and Guidelines...

As your child will be living in a community environment during their stay, we ask that they follow certain rules. These rules have been designed to help make every patient’s stay a therapeutic and safe experience.

Smoking Policy

No smoking is permitted on the Child/Adolescent unit.

Mail

Incoming mail is distributed daily. Letters and packages must be opened in front of staff to prevent the possibility of dangerous or restricted items getting onto the unit. Outgoing mail is picked up daily.

Telephones

There are no telephones in the rooms. There are phones for your child’s use on the unit. The phone numbers are posted. Times when calls can be made are also posted on the unit. As a courtesy to other patients, please limit calls to 10 minutes.

Family members may call the nurses’ station during the day or evening to speak with staff. Please be aware that you will be asked some kind of identifying information (such as their birthday) about your child before we discuss the patient with you. This is for your child’s safety and protection and to ensure the person
we are talking to is entitled to any information. Emergency telephone calls should be placed to the hospital’s main number – 215-487-4000.

Dress Code

We expect that during your child’s stay at Fairmount they will adhere to our patient dress code and be neat and clean at all times. Showers or baths are taken daily and we will assist your child in any way that is needed. One of our goals is to assist the children in taking an active role in looking good and feeling good about themselves. Clothing should be appropriate to the setting and not be skin tight, see through or revealing. Clothing that endorses substance abuse, violence and/or groups or individuals supporting violence or drugs is not appropriate. The adolescents are responsible for doing their own laundry and are give specific times to do it. We do the laundry for the younger children on the overnight shift.

Valuables/Patient Belongings

Fairmount cannot be responsible for any lost or missing item that is not placed in the hospital’s safe. We will request that any items of value be taken home by you. We request that your child not have more than three outfits here at any one time.

Electrical Appliances

The use of items needed for hygiene or grooming, such as curling irons and blow dryers, are permitted to be used under staff supervision. These appliances will be checked by maintenance or nursing and kept secure. When your child needs to use these items the staff will make them available at the appropriate time.

Food

Three meals a day and snacks are provided for patients in the facility. Food may not be kept in patient rooms. For safety, sanitation, and dietary management purposes, visitors are asked not to bring food items into the facility.
Housekeeping

The patients are asked to help clean up after themselves. He/she will be responsible for making his/her bed daily and keeping the bedroom and bathroom neat. While staff will assist with these tasks it is our hope that the patient will learn to do these things independently. Procedures for change of linens will be explained on the unit.

Patient Safety and Respect

Fairmount strives to provide a place of absolute safety and respect for the people we serve and for our employees. For your child’s safety and the safety of others, certain behaviors and items are not allowed. The following are unsafe behaviors that are strictly prohibited:

- Sexual acts or inappropriate physical contacts between patients are not permitted. Please notify staff immediately of any sexual approaches.
- Violence of any sort is not tolerated. This includes verbal threats, physical aggression, or destruction of property.
- Drinking alcohol or using non-prescribed drugs or possession of alcohol or non-prescribed drugs is not permitted.

Unsafe behavior will result in a review of the treatment plan and restrictive measures may be employed.

Fairmount uses surveillance equipment for monitoring of patient safety and strives to maintain a safe and therapeutic environment for all patients, visitors, and staff. In order to achieve this, we restrict access to potentially hazardous items in the facility. These include, but are not limited to the following:

- Spray cans (aerosols)
- Glass containers or other glass items, plastic cassette or CD’s or CD cases
- Razors (single edge, safety, or electric)
- Compacts
- Sharp objects including scissors, knives, metal nail files, and knitting needles
- Metal combs, hair picks, rat tail combs
- Any liquid containing alcohol
- All medications
- Sewing needles, safety pins, straight pins
- Wire coat hangers
- Tape recorders, televisions, radios, cell phones, beepers, computers, or other electrical appliances (Electrical appliances required for daily
personal care, such as hair dryers, will be checked by nursing or maintenance prior to supervised use.)

- Weapons or protection devices
- Scarves, belts, drawstrings in sweat pants, cords, straps, ties, and shoe laces (Staff have plastic ties that can be used in place of belts or shoe laces. We recommend, however, that patients ask their family, if possible, to bring shoes or slippers that do not require laces for your use in the hospital.)
- Plastic bags or sheeting
- Stuffed animals on adult and adolescent units
- Steel toe boots, high heeled shoes
- Any other items deemed dangerous by staff.

Fairmount's goal is to provide a positive and valuable treatment experience for all patients. If you have a concern or problem, there is a procedure for allowing patients and others to register complaints. Patients with complaints should notify their physician, the charge nurse or unit coordinator. These individuals will attempt to resolve the complaint. If complaints are not resolved, the Patient Advocate at the facility can be contacted for further assistance. We strive to solve all concerns and problems quickly and fairly. **Please give us the opportunity to resolve any concerns you or your family may have with our services.**

Should you have a concern that is unresolved, you may also contact the Joint Commission on Accreditation of Healthcare Organizations, One Renaissance Boulevard, Oakbrook Terrace, IL 60181 or [www.jcaho.org](http://www.jcaho.org).

**Discharge Planning**

Discharge planning begins on the day of admission. Your child's plan is formalized under the direction of their attending psychiatrist and is part of their treatment plan. A well-designed discharge plan is key to your child's success after you leave the hospital. Your involvement in discharge planning is essential. The coordination of the discharge planning process is the general responsibility of your child's Social Worker, but involves other members of the treatment team. Before your child's discharge, you will receive a written discharge plan. With your signed permission the discharge plan will be discussed with your child's outpatient provider, the insurer and anyone else directly involved in ensuring your child the best care after discharge.

**Summary**

We hope that this handbook is helpful as you begin your treatment. Know that we want the best for you and your child and will work with you during your child's
stay. Please let us know if you have any questions or concerns. We are ready to help you as well as your child!
Let’s Go Restraint Free…

Community Expectations…

This is a place for people in life crisis. It is a place of treatment and hope. Violence in any form – directed towards yourself or others – physically or verbally – hurts the community and adds to life crisis.

Everyone shares in the responsibility of safe community. You are expected to respect the rights of our community and to keep yourself and others safe.

Nonviolence Statement…

This hospital is a place to heal. To be a healing place, we all work to keep this a nonviolent environment. We ask that we all avoid violence in any form.

What are restraints?

A restraint is anything that limits a person from moving around or reaching a part of his or her body. Restraints are usually leather waist, wrist, or ankle belts that would keep a patient secure in a bed.

Why are restraints used?

Restraints are used for no other reason than to protect your safety and the safety of those around you. They allow treatment to be administered to a person who is combative and loses control. Restraints are used only in an emergency as a last resort after less restrictive alternatives have been found not to be sufficient.

Our goal is to become restraint free…

In order to promote good health and maintain respect for your child’s dignity, our hospital is committed to using restraints as little as possible – or even better, not using them at all. If restraints must be used, we will ensure that they are applied for the shortest time possible and that your child will have as much privacy as possible. We will monitor your child closely to assure their safety.
Soon after the restraints are removed, we will interview your child to identify means for your son or daughter not to go through another restraint episode again. This important interview is called a “debriefing”. If we ever need to protect your child and the people around your child through the use of restraints you will be notified by telephone as soon as possible. Please keep in mind that restraints are only used when all other measures have failed and there is a safety issue involved.

**Achieving a restraint free environment requires teamwork!**

Your child is the most important member of the team. It is important that you and the staff talk to each other and that your child talks to the staff in an open, honest way. It is important that everyone be involved. The staff may need the input of your family and friends.

Soon after admission, a member of the staff will meet with your child and work with him/her on developing a safety plan. This plan will help staff know what kinds of things help your child when they are feeling angry, unsafe, or out of control.

Your child may have times when they feel as if they cannot control themselves or their anger. Your child may feel like yelling, throwing things, or hitting someone. Helping them to regain control may require the help of the following individuals:

- **Psychiatrists** can order medication to help them stay in control. If their loss of control is due to medication, they may stop it or change the dosage.
- **Nurses** can talk to your child and find out what is wrong. They can guide them to an area that is quiet and away from other patients. They may give medication.
- **Social Workers and Allied Therapists** can help your child understand their behavior and help them control their anger using nonviolent coping skills. They can help your child, your family and friends to better manage and help maintain control of your child’s behavior. They can also help your child control their impulses by teaching them activities and exercises to do.
- **Family and friends** can give their opinions on what helps your child when they are out of control. We will notify them as necessary with your permission. If there is anyone in particular that you want us to notify, (such as a grandparent etc.) please inform the staff so we can discuss this arrangement with the person you name.
A restraint free environment starts with you...

Your child can use the following steps to help prevent the use of restraints:

1. Accept that they are angry.
2. Accept that certain behaviors are not acceptable.
3. Try slow deep breathing exercises.
4. Try removing him/herself from any irritating situation.
5. Ask to use a quiet area on the unit until they are in control.
6. Ask for help as soon as they need it.
7. Accept help when it's offered.

Attachment 2

EXPLANATION OF VOLUNTARY ADMISSION RIGHTS
(Minor under 14 years of age)

Before your child's voluntary admission to this hospital, you and your child have the right to:

1. An explanation of the type of treatment in which your child may be involved.

2. An explanation of any restraints or restrictions to which your child may be subject.

Upon your child's admission, you and your child will have the following rights:

1. Within 72 hours after your child's admission, a plan of treatment will be developed. You may participate in the development of this plan.

2. You may withdraw your child from treatment at any time by giving written notice to the Director of this facility; however, you may be asked to agree to allow your child remain in the facility for a specified time up to 72 hours after you request discharge. If, when you are asked to allow your child to remain for this period of time, someone will immediately explain why to you. The facility may institute involuntary commitment proceedings during this period.

3. Your child may not be transferred from this facility to another facility without your consent.

In addition to the above rights, the attached Bill of Rights attached applies to you and your child upon admission. You will receive a longer, more detailed version of these rights within 72 hours after your child's admission.
If you do not understand any of these rights, please ask a staff member to explain.

IMPORTANCE NOTICE

If any responsible party believes that treatment in this facility is not in the best interest of your child, that person may take legal action to modify the treatment or to obtain your child’s discharge.
PATIENT BILL OF RIGHTS
YOU HAVE A RIGHT TO BE TREATED WITH DIGNITY AND RESPECT
YOU SHALL RETAIN ALL CIVIL RIGHTS
THAT HAVE NOT BEEN SPECIFICALLY CURTAILED
BY ORDER OF COURT

1. You have the right to unrestricted and private communication inside and outside this facility including the following rights:

   a. To peaceful assembly and to join with other patients to organize a body of or participate in patient government when patient government has been determined to be feasible by the facility.

   b. To be assisted by any advocate of your choice in the assertion of your rights and to see a lawyer in private at any time.

   c. To make complaints and to have your complaints heard and adjudicated promptly.

   d. To receive visitors of your own choice at reasonable hours unless your treatment team has determined in advance that a visitor or visitors would seriously interfere with your or others treatment or welfare.

   e. To receive and spend unopened letters and to have outgoing letters stamped and mailed. Incoming mail may be examined for good reason in your presence for contraband. Contraband means specific property, which entails a threat to your health and welfare or to the hospital community.

   f. To have access to telephones designated for patient use.

2. You have the right to practice the religion of your choice or to abstain from religious practices.

3. You have the right to keep and to use personal possessions, unless it has been determined that specific personal property is contraband. The reasons for imposing any limitation and its scope must be clearly defined, recorded and explained to you. You have the right to sell any personal article you make and keep the proceeds from its sale.

4. You have the right to handle your personal affairs including making contracts, holding a driver’s license or professional license, marrying or obtaining a divorce and writing a will.

5. You have the right to participate in the development and review of your treatment plan.

6. You have the right to receive treatment in the least restrictive setting within the facility necessary to accomplish the treatment goals.

7. You have the right to quick, appropriate response to reports of pain, including information about pain and pain relief measures.

8. You have the right to be discharged from the facility as soon as you no longer need care and treatment.
9. You have the right not to be subjected to any harsh or unusual treatment.

10. If you have been involuntarily committed in accordance with civil court proceedings, and you are not receiving treatment, and you are not dangerous to yourself or others, and you can survive safely in the community, you have the right to be discharged from the facility.

11. You have the right to be paid for any work you do which benefits the operation and maintenance of the facility in accordance with Federal wage and hours regulations.

12. You have a right to a physically and emotionally safe environment.

Addendum to Patient Bill of Rights

Patient is hereby advised of right to appeal a treatment plan if they believe treatment is not necessary or appropriate for their needs. Request can be made through a member of the Nursing Department who will advise the appropriate staff member.

1. The following legal advocacy services are available to the patient:

   Community Legal Services
   1424 Chestnut Street
   Philadelphia, PA 19103
   215-981-3700
   (Main Office & Information)

   Lawyer Reference Service of Philadelphia Bar Association
   1101 Market Street
   Philadelphia, PA 19107
   215-238-1701

2. If you have any questions concerning the Mental Health Procedures Act of 1976 that you feel have not been adequately answered by hospital personnel, please feel free to direct inquiries to:

   Office of Mental Health/Mental Retardation
   Acute Services Unit
   123 S. Broad Street, 22nd Floor
   Philadelphia, PA 19109
   215-546-0300 main number
   215-685-6440 mental health delegate
   215-546-0300 x3516 mental health court
CONSUMER BILL OF RIGHTS AND RESPONSIBILITIES

Information Disclosure

Consumers have the right to receive accurate, easily understood information and some require assistance in making informed health care decisions about their health plans, professionals, and facilities.

Access to Emergency Services

Consumers have the right to access emergency healthcare services when and where the need arises. Health plans should provide payment when a consumer presents to an emergency department with acute symptoms of sufficient severity – including severe pain – such that a "prudent layperson" could reasonably expect the absence of medical attention to result in placing that consumer's health in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

Participation in Treatment Decisions

Consumers have the right and responsibility to fully participate in all decisions related to their healthcare. Consumers who are unable to fully participate in treatment decisions have the right to be represented by parents, guardians, family members, or other conservators.

Respect and Nondiscrimination

Consumers have the right to considerate, respectful care from all members of the healthcare system at all times and under all circumstances. An environment of mutual respect is essential to maintain a quality healthcare system.

Confidentiality of Health Information

Consumers have the right to communicate with healthcare providers in confidence and to have the confidentiality of their individually identifiable healthcare information protected. Consumers also have the right to review and copy their own medical records and request amendments to their records.
CONSUMER RESPONSIBILITIES

In a health care system that protects consumers' rights, it is reasonable to expect and encourage consumers to assume reasonable responsibilities. Greater individual involvement by consumers in their care increases the likelihood of achieving the best outcomes and helps support a quality improvement, cost-conscious environment. Such responsibilities are to:

- Take responsibility for maximizing healthy habits, such as exercising, not smoking, and eating a healthy diet.
- Become involved in specific health care decisions.
- Work collaboratively with health care providers in developing and carrying out agreed upon treatment plans.
- Disclose relevant information and clearly communicate wants and needs.
- Use the health plan's interval complaint and appeal processes to address concerns that may arise.
- Avoid knowingly spreading disease.
- Recognize the reality of risks and limits of the science of medical care and human fallibility of the health care professional.
- Be aware of a health care provider's obligation to be reasonably efficient and equitable in providing care to other patients and the community.
- Become knowledgeable about his or her health plan coverage and health plan options (when available) including all covered benefits, limitations, and exclusions, rules regarding use of network providers, coverage and referral rules, appropriate processes to secure additional information, and the process to appeal coverage decisions.
- Show respect for other patients and health workers.
- Make a good faith effort to meet financial obligations.
- Abide by administrative and operational procedures of health plans, health care providers, and government health benefit programs.
- Report wrong doing and fraud to appropriate resources or legal authorities.
PATIENT/FAMILY GRIEVANCES

PROCEDURE:

1. When a concern (i.e., confusion, conflict or uncertainty) arises concerning a patient care issue, the patient, family members, or designated representatives are encouraged to first attempt to resolve the matter by communicating with the patient's physician and other members of the patient's treatment team.

2. If resolution is not achieved, the patient may seek to resolve the issue through the following procedures:

Patient Grievance Procedure

2.1 Any patient, or those helping him/her, may initiate a complaint orally or in writing, concerning the exercise of these rights or the quality of services and treatment of the facility. The complaint shall be presented as soon as possible to the nursing supervisor, Chief Nursing Officer, Program Director, or attending physician.

2.2 Every patient shall have the right to the assistance of an independent person and witnesses in presenting his complaint.

2.3 The Chief Nursing Officer, Unit Coordinator, Program Director, or attending physician, receiving the complaint shall investigate the complaint and make every effort to resolve it. Complaints shall be decided by persons not directly involved in the circumstances leading to the grievance.

2.4 If the patient is not satisfied with the outcome, he/she may take this/her complaint to the Patient Advocate, who will re-investigate the complaint and make every effort to resolve it. If the patient is not satisfied with the resolution by the Patient Advocate, he/she may submit his/her concern in writing as a grievance to the Patient Rights/Ethics Committee which is composed of physicians, the Chief Nursing Officer and other clinical staff. The Patient Rights / Ethics Committee shall meet to review the grievance and render a decision in writing within 48 hours.

2.7 Any patient, or those helping him/her, may appeal the decision of the Patient Rights/Ethics Committee within ten working days of the decision to the CEO who will make a decision within ten working days of the appeal.

2.7 The patient shall be given a copy of the final decision and a copy shall be filed in the patient's record.
Guidelines for Community Living at Fairmount

Introduction: Patients at Fairmount live in a communal (shared). In order to minimize the risk of infections, patients are asked to abide by the following guidelines.

Personal Hygiene: While living in a group, it is important for patients to maintain proper personal hygiene. Personal Hygiene consists not only of showering and/or bathing regularly, it also includes the appropriate use of tissues to dispose secretions, regular tooth brushing, as well as simply maintaining the surroundings in a clean and orderly a fashion as possible. We do not allow the sharing of personal items such as toothbrushes, hairbrushes and clothing.

Hand Washing: Hand washing has been found to be the single most effective method of infection prevention. Hands should be washed after using the toilet, prior to eating, prior to any food preparation and after engaging in any activity that is likely to cause your hands to become soiled. Remove all jewelry. Wet hands and wrist with warm water and apply soap (antibacterial is preferred), work up a lather by rubbing hands together vigorously for a minimum of fifteen (15) seconds. If unable to remove a ring, move it up and down the finger to clean beneath it. Pay particular attention to the areas under the fingernails, around cuticles and thumbs, knuckles and sides of the hands. Rinse hands and wrist well. The patient should hold their hands down in the sink below elbow level. Dry hands well with paper towels. Discard used towels in waste container. This is an important skill we insist is learned and followed.

Body Fluids: Fairmount, as well as other hospitals practice UNIVERSAL PRECAUTIONS. This means that we assume that all body fluids (blood, saliva, sputum, semen) are potentially infectious and should be treated as such for the protection of your child, other patients and staff alike. This means that the staff will be wearing gloves and other protective equipment at times when they may come in contact with body fluids. Patients are encouraged to avoid contact with their own body fluids and/or those of others.

Food Handling and Preparation in the Kitchen Area:

Food preparation for your child as well as others is a part of the therapeutic experience at Fairmount. The appropriate use of hand washing and glove use before touching and handling food as well as the cleaning of utensils is essential in maintaining the health of the group. Food must be properly sealed/stored and handled. We at Fairmount follow the Department of Health guidelines in all areas of food preparation and storage.

Laundry and Bed Making:

Patients are expected to make their own beds. It is advisable to make beds and strip beds in a way that minimizes the amount of debris being introduced into the environment. (Do not flap, shake, sort, etc. bed linen). All should be bagged or placed in separate laundry baskets/bags in the patient’s room and then transported to the laundry room. Routinely
soiled items may be washed with hospital-supplied detergent and/or other appropriate cleaning agents. Patients should not mix their laundry with another patient's. Your child's laundry will be done by the night staff on a routine basis.

**Sexual Contact:** Sexual contact is prohibited within the confines of Fairmount.

**Visitors:** Visitors suspected of having a communicable disease must be assessed by the nurse before entering the unit.

**Common Misconceptions:**

HIV, the virus that causes AIDS, is not passed through air, water, and food or by casual contact. You cannot get AIDS from mosquito bites; you will not get it from bed bugs, flies, or other insects either. You cannot get AIDS from someone's tears, saliva, urine or bowel movement. You cannot get AIDS from a chair, clothing, a telephone, or a toilet seat. It cannot be passed on by using a glass or eating utensils. You cannot get it from a kiss. As HIV virus can only be transmitted through blood, semen, breast milk, and vaginal fluids, there are only a limited number of ways in which it can be contracted.
Guidelines for Visitors

Visiting Hours for Child Inpatient Unit are:

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
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<tbody>
<tr>
<td>Tuesday</td>
<td>6:30 PM – 7:30 PM</td>
</tr>
<tr>
<td>Thursday</td>
<td>6:30 PM – 7:30 PM</td>
</tr>
<tr>
<td>Saturday</td>
<td>3:30 PM – 4:30 PM</td>
</tr>
<tr>
<td>Sunday</td>
<td>3:30 PM – 4:30 PM</td>
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</tbody>
</table>

Visiting will be limited to these scheduled hours so that patients can fully participate in all treatment activities. No one will be permitted on the unit during other hours unless they have a pre-scheduled appointment with the doctor or Social Worker.

All visitors must have a visitor’s badge to enter the unit. These badges are obtained at the front desk of the main hospital and must be visible at all times.

Visitors on the Child/Adolescent Units must be 16 years of age. Visitors are limited to two family members per patient. Family members include parents, guardians, and grandparents. Siblings over the age of 16 must be accompanied by the parent. Visitors must use the lockers to store their bags, coats, purses, and other personal items prior to entering the units. All patient belongings brought into the facility for the patients must be given first to staff to be checked prior to use by the patient.

No food or drink can be brought onto the units.

Any visitor who brings contraband, including matches or lighters, to the units will be asked to leave and not return. Any visitor who is disruptive to the units will be asked to leave.