

**DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES
ADMINISTRATIVE BULLETIN 3:39**

Effective Date: March 23, 2015

SUBJECT: PATIENT ACCESS BY NON-STAFF VISITORS AND PROVIDER AGENCIES

I. PURPOSE

The protocols in this Bulletin are intended to facilitate a constructive working relationship between non-staff visitors, provider agencies and the administrative and clinical staff at State Psychiatric Hospitals. This Bulletin establishes procedures that allow for access to patients by non-staff visitors for legitimate purposes and describes how non-staff visitors and provider agencies shall interact with the patients and administration in the conduct of their activities. Specifically, this is to ensure that all interviews/meetings between non-staff visitors, provider agencies and patients take place in a safe environment; patients will only be permitted to meet with individuals who have followed the procedures in this Bulletin. These procedures are established to protect the health and safety of patients, staff, non-staff visitors and provider agencies. Insofar as they do not conflict with this policy, the hospital policies are not rescinded.

II. AUTHORITY

N.J.S.A. 30: 1-7 and 1-12

N.J.S.A. 30:4-24.3

42 CFR Part 2

Health Insurance Portability and Accountability Act of 1996 (HIPAA) (P.L.104-191) and the HIPAA Privacy & Security Rule 45 C.F.R. 160 & 164

III. DEFINITIONS

- A. **CLINICAL APPROPRIATENESS** – means the patient’s clinical state that would enable staff to ensure within a reasonable degree of clinical certainty the physical safety of both patient and visitor at the scheduled time. Additionally, clinical appropriateness includes measures put in place to assure that the non-staff visitor, patient, and others would be as safe as possible from physical harm. Clinical appropriateness is determined by the psychiatrist and his/her designee with input from the treatment team.
- B. **DESIGNATED AREA** - means an approved area or areas identified by the hospital that can provide security and confidentiality to the non-staff visitor and patient as much as is reasonably possible. All designated areas in each state psychiatric hospital are listed on Attachment A.

- C. **DESIGNATED CHECK-IN ENTITY** - means a person or place designated by the hospital where non- staff visitors, as defined in this Bulletin, who will be interviewing one or more patients, will be required to sign in and receive swipe card/key, as well as sign out and return the card or key. The check-in entities for each of the state psychiatric facilities are listed in attachment B to this Bulletin.
- D. **NON-STAFF VISITORS** - means visitors that include employees of the Office of the Public Defender, Disability Rights of New Jersey, including advocates and investigators, county counsel, peer specialists and any non-hospital staff that lawfully present themselves to the designated scheduling entity to meet with a patient or group of patients. This definition excludes family members of the patients, students that are participating in clinical practicums as part of an affiliation agreement with the facility and consultants and provider agencies under contract with the Division of Mental Health and Addiction Services (DMHAS) to provide medical and other clinical services to patients at the state psychiatric hospitals.
- E. **PROVIDER AGENCIES** – means those entities under contract with the DMHAS to provide clinical and treatment services to patients in the state psychiatric hospitals and upon discharge in the community. Most specifically this definition includes services provided by ICMS, PACT, RIST and other supportive housing provider agencies. Due to the nature of their contracts with the DMHAS, provider agencies shall check-in with the designated check-in entity and proceed to meet with hospital staff to discharge their clinical duties.
- F. **STATE PSYCHIATRIC FACILITIES** – means those state psychiatric hospitals that are defined in N.J.S.A. 30:1-7, namely Greystone Park Psychiatric Hospital, Trenton Psychiatric Hospital, and Ancora Psychiatric Hospital. This policy does not apply to Ann Klein Forensic Center (AKFC). AKFC has a separate policy for non-staff visitors and family visitors.
- G. **TREATMENT TEAM** - means an inter-disciplinary team composed of members from different disciplines, such as, but not limited to: psychiatry, psychology, social work, rehabilitation, and nursing, program coordinator who along with the patient formulate and implement a plan of care that will help maximize the patient’s goal of being re-integrated back into the community.

IV. **SCOPE**

This policy shall be implemented and have full force and effect at the following State Psychiatric hospitals:

1. Ancora Psychiatric Hospital
2. Greystone Park Psychiatric Hospital
3. Trenton Psychiatric Hospital

V. PROCEDURES

A. CHECK-IN

1. In advance of any hospital check-in, all non-staff visitors must provide the CEO of the State Psychiatric Hospital with a current list of staff that may request access to patients in the DMHAS state psychiatric hospitals. All non-staff visitors shall participate in and complete a safety training at the state psychiatric hospitals to familiarize themselves with hospital policy and protocols. The initial safety training shall be completed within four (4) months of the issuance of this Bulletin. Training will be offered periodically to new non-staff visitors and documentation of trainings will be kept by respective hospital CEOs. Documentation of training completion must be provided to the CEO of the State psychiatric hospital.
2. The CEOs of the DMHAS State psychiatric hospitals shall provide the Chief Executive of the organization of the non-staff visitors, such as the Office of County Counsel, Office of the Public Defender and Disability Rights New Jersey a current list of the designated check-in areas that are to serve as point of contact for the non-staff visitors. The lists are attached to this Bulletin.
3. All non-staff visitors entering the hospitals for the purpose of interviewing one or more patients are required to contact the designated check-in entity at least one hour in advance of the proposed visit. This will allow staff to provide some preliminary information as to the patient's clinical condition and any safety issues that need to be relayed to the non-staff visitor.
4. Each unit in each hospital will have a designated check-in entity. If a non-staff visitor needs to access patients on several different units within a building or complex, the non-staff visitor would request that the designated check-in entity call the nursing station in the respective unit(s), building(s) or complex(es) where the non-staff visitor would be arriving and then notify the nursing station of which patients the visitor is requesting to meet.
5. After the non-staff visitors check-in with the designated entity, all meetings will take place in a designated area as defined in this Bulletin. If the non-staff visitors are clinicians or peer specialist that are part of the discharge planning process, these clinicians and peers will check-in with the designated check-in entity and then will meet with the treatment team and patient as appropriate and necessary and as defined in the respective affiliation agreements. (Attachment A to this Bulletin).
6. The non-staff visitor will be provided a pass to be worn so as to be visible to staff at all times, and either an escort (to the point of access to patient areas or to the meeting), or a key or swipe card (for persons visiting patients or staff on multiple units). The same check-in staff shall assure that no visitor leaves the hospital without surrendering the pass and the key or swipe card, if any.

7. Staff on each unit shall assure that only visitors who have reported to the designated check-in area shall be admitted to patient areas, and that relevant staff are aware of the visitor's presence and purpose.
8. The designated check-in entity or designee will inform the non-staff visitor of the patient's whereabouts and will discuss any current safety concerns of which the non-staff visitor should be aware.

B. ESCORTS

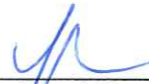
1. If an escort is to remain with the non-staff visitor for the duration of the visit, this must be scheduled with the designated check-in entity twenty-four hours in advance. The hospital administration reserves the right to provide the non-staff visitor with an escort where it deems one appropriate and necessary for safety reasons in addition to the clinical reasons in V(B)(2) below. A psychiatrist or his/her designee, with input from the treatment team, shall determine the need and extent of staff escort to be provided to the visitor on the unit and with the patient. At either the check-in point or on the unit, an escort will be assigned, as appropriate, to the visitor or advocate representative of the patient for their meeting/interview to further ensure their safety. The escort will be within sightlines, but at a reasonable distance to provide privacy.
2. In the event that the patient is unstable, the treating psychiatrist or his/her designee, with input from the treatment team, may deny the non-staff visitor unsupervised access to the patient. The clinical staff shall express any concerns to the non-staff visitor, and the non-staff visitor will have the choice to postpone the interview or to meet with the patient with staff present or observing, as indicated by clinical considerations and available accommodations. Nursing staff will document any such denial of unaccompanied access in the patient chart. It is presumed that with staff assistance and observation the continuation of the visit is safe. Section V (B) (3) provides the protocol for when visiting or interviewing a patient is no longer safe.
3. In the event the patient's clinical conditions changes after the visit is scheduled or during the scheduled visit, such that it would no longer be safe for the non-staff visitor to meet with the patient, the nursing staff will contact the visitor as soon as this is known to re-schedule the visit. The visit shall be terminated due to safety concerns.

C. NON-STAFF VISITOR ATTENDANCE AT TREATMENT TEAM MEETINGS

1. The treatment team or the patient may request that a non-staff visitor, such as a patient's attorney or advocate, attend a regular or special treatment team meeting. As such, the non-staff visitor shall be permitted to speak at the meeting and to have private conversations with the patient out of the hearing of the team during the meeting, but shall not speak for the patient or disrupt the meeting.

The chair of the treatment team may require that the non-staff visitor leave the meeting as a result of a safety or clinical concern that becomes apparent at the meeting. If the non-staff visitor disrupts the meeting, then such disruption shall also provide a basis to terminate the meeting. Documentation of the reasons for termination of the meeting shall be in the team meeting minutes or notes.

2. If a non-staff visitor requests a meeting with the team or a member of the team, the team member or chair (if the entire team is requested) shall obtain the patient's consent where needed (staff from the Office of the Public Defender, other patient attorneys, and staff from New Jersey Disability Rights only need proof that they represent the person; county counsel need only county identification) and shall convene the team or meet with the person at a mutually convenient time. Any such meeting would be solely to answer questions as appropriate and provide information and not follow a normal treatment team clinical format. The patient shall be invited to the meeting unless his or her clinical condition prevents his or her attendance.
3. In the event any non-staff visitor presents at the hospital to meet with a patient without scheduling the visit in advance, access to the patient shall be permitted only if the patient has requested the visit because of an emergency. The non-staff visitor shall affirm in writing that such a request was received. Any disputes about right of access to a patient shall be referred to the CEO or designee.



Lynn A. Kovich, Assistant Commissioner
Division of Mental Health and Addiction Services

Date: 3/13/15

ATTACHMENT A

DESIGNATED AREAS FOR CONSUMER INTERVIEWS

(GREYSTONE PARK PSYCHIATRIC HOSPITAL • 973-538-1800)

All visitors are required to enter through the main entrance of the hospital and check-in with the Front Desk.

The Front Desk extensions are 5222 & 5223.

Visitors normally meet in the dining rooms on each unit. Any need for an alternate meeting location will be determined on a case-by-case basis by the Hospital Administrator.

UNIT (Building)	Telephone Extension
A1 Dining Room (A125)	4207
A2 Dining Room (A225)	4243
A3 Dining Room (A325)	4277
B1 Dining Room (B125)	4420
B2 Dining Room (B225)	4460
B3 Dining Room (B325)	4492
D1 Dining Room (D125)	4589
D2 Dining Room (D225)	4620
D3 Dining Room (D325)	4645
E1 Dining Room (E125)	4744
E2 Dining Room (E225)	4769
E3 Dining Room (E325)	4792
F1 Dining Room (F125)	4827
F3 Dining Room (F325)	4895

DESIGNATED AREAS FOR CONSUMER INTERVIEWS

(ANCORA PSYCHIATRIC HOSPITAL)

UNIT (Building)	MEETING ROOM (non-staff visitors)
MAIN	
M-1	154
M-2	221
M-3 (treatment mall)	355/356
F-1	155
F-2	221
F-3	361
BIRCH	
BHA	117
BHB	133
BHD	243
CEDAR	
CHB	134
CHD	234
LARCH	
LHA	108
LHB	133
LHD	233/234
HOLLY	
1 ST floor Center	105

G2 Dining Room (G225)	5161
G3 Dining Room (G325)	5186
Cottage 11 (Back Day Room)	4855/5855
Cottage 12 (Back Day Room)	4857/5857
Cottage 13 (Dining Room)	4858/5858
Cottage 14 (Back Day Room)	4840/5840
Cottage 15 (Conference Room)	5719
Cottage 16 (Back Day Room)	4862/5862
Cottage 18 (Dining Room)	4864/5864
Cottage 19 (Back Day Room)	4867/5867
Cottage 20 (Back Day Room)	4868/5868

DESIGNATED AREAS FOR CONSUMER INTERVIEWS

(TRENTON PSYCHIATRIC HOSPITAL)

UNIT (Building)	MEETING ROOM (non-staff visitors)
Drake	C-214-A/Back up - Cafeteria (Contact Person - Camilla Worthey/609-633-1815)
Raycroft	C-233/Back up - Cafeteria (Contact Person - Sara Bennett/609-633-1741)
Lincoln	#171B/Back up - Cafeteria (Contact Person - Mai Brow/609-633-1676)
Travers (in Marquand)	#217/Back up #216 (Contact Person - Thomas Alvarez/609-1830; back up # - SON/HCS Office - 609-633-0666)

ATTACHMENT B
DESIGNATED CHECK IN ENTITY

- (1) ANCORA PSYCHIATRIC HOSPITAL – VISITOR'S CENTER
- (2) GREYSTONE PSYCHIATRIC HOSPITAL – FRONT DESK AT
ENTRANCE EXT. 5222, 5223
- (3) TRENTON PSYCHIATRIC HOSPITAL – PARKER BUILDING
ENTRANCE IN THE STRATTON COMPLEX