



**MONTANA STATE HOSPITAL
FORENSIC MENTAL HEALTH FACILITY
POLICY AND PROCEDURE**

**NOTIFICATION OF POLICY IMPLEMENTATION OR CHANGE
FOR THE
FORENSIC MENTAL HEALTH FACILITY**

Effective Date: February 1, 2016

Policy #: MSH FMHF-04

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- I. PURPOSE:** To establish a procedure to assure that staff assigned to the Montana State Hospital (MSH) Forensic Mental Health Facility (FMHF) understand and follow policies specific to operation of the program. To establish a method of informing patients of new or revised policies and procedures.
- II. POLICY:** All staff assigned to the MSH FMHF will review all policies and procedures concerning the operation of the program or the facility. Updated information will be provided to staff as policies and procedures are initiated or revised. Patients at the FMHF will be informed of new or revised policies and procedures that may have a direct impact on them.
- III. DEFINITIONS:** None
- IV. RESPONSIBILITIES:**
 - A. MSH FMHF Program Manager: Ensure staff have access to all policy and procedures and understand the applicability of this information to the program and operation of the facility. Inform patients of new or revised policies and procedures that may have a direct impact on them.
 - B. MSH FMHF Staff will read, attempt to understand policies and procedures, ask questions to clarify uncertainty, and bring concerns to their supervisor's attention. Staff must sign a form verifying they have reviewed and understood FMHF policies.
- V. PROCEDURE:**
 - A. A policy and procedure manual will be available at the FMHF and as a desktop shortcut on all staff computers.
 - B. Each member of the hospital assigned to work the FMHF will review the policy and procedure manual and sign a confirmation sheet. This signature signifies that the employee understands the information and their obligation to follow the policy or procedure.

