



**MONTANA STATE HOSPITAL
Forensic Mental Health Facility
POLICY AND PROCEDURE**

**SECURITY PROCEDURES: Patient Visitation
for the Forensic Mental Health Facility**

Effective Date: February 1, 2016

Policy #: MSH FMHF-23

Page 1 of 4

- I. PURPOSE:** To provide security procedures specific to the Forensic Mental Health Facility (FMHF) of Montana State Hospital (MSH).
- II. POLICY:** The Forensic Mental Health Facility of MSH primarily serves individuals on forensic commitments charged with crimes, found guilty of crimes, found not guilty by reason of mental illness in criminal proceedings, or persons transferred from state correctional facilities. A higher level of security will be maintained in this facility in order to provide appropriate safety for patients, employees, and the public and to reduce the risk of unauthorized leave. This policy does not apply to other units of MSH where people on forensic commitments may be placed.
- III. DEFINITIONS:**
 - A. Forensic Commitments – Those occurring under Title 46, Section 14 of the Montana Code and refer to person on Court Orders for Evaluation (COE); Unfit to Proceed (UTP); Not Guilty by Reason of Mental Illness (NGMI); Guilty but Mentally Ill (GBMI); or revocation of a conditional release under this section of law. The term also refers to persons transferred from Montana Department of Corrections facilities who may be on civil commitments.
 - B. Forensic Patients – patients at MSH FMHF on a forensic commitment.
 - C. FMHF – The Forensic Mental Health Facility located in Galen.
 - D. Contraband – are items which patients are prohibited from owning, purchasing or having in their possession. This is an item that constitutes a safety or security concern, which can be denied or confiscated. These items pose a serious threat to the hospital; are never approved for possession or admission to the hospital; or present a health, fire or safety hazard. Contraband items include but are not limited to tobacco products, lighters or matches, weapons of any kind, illicit drugs or narcotics, other sharps such as needles, straight or safety pins, scissors, razors, metal nail files, combs or letter openers, plastic bags and steel toed boots or high heeled shoes. Any devices that have recording capabilities will not be made available to patients to ensure confidentiality during hospitalization. Any exceptions to contraband items must be

approved by the Hospital Administrator or designee. Please see Contraband and Searches policy #SF-02.

IV. RESPONSIBILITIES:

- A. Licensed Independent Practitioner (LIP) assigned to the Unit – Assists when needed to coordinate the day to day management of the facility including safety issues and property allowances with the Program Manager and Nursing Supervisor by evaluating patient needs and writing orders and making treatment plan entries specific to individual patients.
- B. Program Manager – To manage the program and personnel assigned to the unit in a way that provides safety and security and meaningful active patient treatment.
- C. Nursing Manager – To oversee the delivery of nursing care including the supervision of nursing staff and adherence to security procedures on any and all shifts.
- D. Registered Nurse – To manage operation of the unit on every shift and to provide supervision of nursing department personnel including Licensed Practical Nurses and Psychiatric Technicians.
- E. Forensic Mental Health Technicians(FMHT's) – To monitor safety and security on the pods and encourage compliance with safety policies as well as provide clothed body searches, room searches, ward searches, and direct monitoring of the facility.
- F. Visitors – family, friends, clergy, attorneys, physicians, representatives of the Board of Visitors or a qualified protection and advocacy system, and spiritual counselors who wish to visit patients while at the FMHF.
- G. Contact Visits – face-to-face visits between the visitor and the patient.
- H. Non-contact Visits – visits that do not allow physical contact between the visitor and patient.

V. PROCEDURES:

- A. Patient Visitation:
 - 1. Patients may be authorized to have a contact visit in the designated visiting room or a non-contact visit in specialized non-contact visiting rooms depending on their level and the treatment team's assessment of their readiness to be safe during visits.
 - 2. All visits will be monitored with the video system for safety, security, and appropriate behavior.

Montana State Hospital Forensic Mental Health Facility Policy and Procedure

SECURITY PROCEDURES: Visitation for the Forensic Mental Health Facility

Page 3 of 4

3. All visitors will check in at the front desk at the FMHF to receive a visitor's badge. Visitors will wear this badge on the front of their clothing at all times during the visit and return the badge to the front desk at the end of the visit.
4. All visitors will need to provide accurate identifying information prior to receiving access to the patient and to identify in advance the patient they wish to visit as well as a stated purpose for the visit. Official employee identification cards will be sufficient identifying information for staff and authorized agents of the Montana Mental Disabilities Board of Visitors or a designated protection and advocacy system. This information will be used as the basis to clear the visitor to visit in either the contact or non-contact visiting room and the information will be used to secure the patient's advance permission for the visit. Patients have a right to refuse visits.
5. Visits will occur during facility visiting hours. Prior to a visit, visitors will be informed about the rules of visitations at the hospital, including the following:
 - a. Contraband will not be allowed during visitation.
 - b. No items may be taken into the visitor's room.
 - c. Visitors will leave the following items in their car or designated lockers at the entrance of the FMHF: coats, jackets, purses, handbags, backpacks, car keys, cell phones, sharp objects, pocket knives, food or drinks, lighters, and metal objects.
 - d. Visitors will need to clear the metal detector and hand wand as well as a clothed body search before contact and non-contact visits.
 - e. Visitors will be informed that it is a criminal offense to aid in the escape of a forensic patient and it is a criminal offense to bring in alcohol or drugs to a forensic patient per MCA codes 53-1-102 and 53-1-103.
 - f. Termination of the visit will occur in the event of inappropriate behavior, such as but not limited to: sexual contact, alcohol and/or drug use, threatening or assaultive/aggressive behavior.
 - g. The treatment team reserves the authority to deny a visit for safety or treatment reasons.
6. Attorneys, Clergy, Physicians, and Mental Health Professionals may bring in authorized materials necessary for the purpose of the visit but may not bring contraband to the visit.
7. Visitors may leave the following items for the patient at the front desk:
 - a. money
 - b. phone cards
 - c. clothes as long as it is appropriate for the facility and the patient's level and does not exceed the clothing limit.

Montana State Hospital Forensic Mental Health Facility Policy and Procedure

SECURITY PROCEDURES: Visitation for the Forensic Mental Health Facility	Page 4 of 4
--	--------------------

- 8. Before returning the their pod, patients returning from the contact and non-contact visiting room will have a clothed body search and clear the metal detector or the hand held metal detector.
- 9. All authorized clothing left at the front desk will be searched by FMHF staff before allowed in the pod.

VI. REFERENCES: ARM 37.106.1615

VII. COLLABORATED WITH: Hospital Administrator, Medical Director, Director of Clinical Services; Director of Nursing, Forensic Unit Treatment Team, and Safety Officer.

VIII. RESCISSIONS: None, new MSH FMHF policy.

IX. DISTRIBUTION: All MSH FMHF policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM §37.106.330.

XI. FOLLOW-UP RESPONSIBILITY: FMHF Program Manager

XII. ATTACHMENTS: None

_____/____/____
John W. Glueckert Date
Hospital Administrator

_____/____/____
Thomas Gray, M.D. Date
Medical Director