



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

PATIENT VISITATION

Effective Date: June 19, 2020

Policy: ADM-08

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- I. PURPOSE:** To provide guidelines for visiting Montana State Hospital (MSH) patients. Visits from family members, friends, and other supportive individuals may enhance the treatment provided to patients and increase the prospect for the patient's successful return to the community. Additionally, Montana's mental health statutes, Title 53, Chapter 21, Montana Code Annotated, recognizes a patient's right to visitation. The guidelines for visiting are intended to support a safe and therapeutic environment for patients, visitors, and hospital staff. The guidelines are intended to maximize the benefit of patient visitation by supporting a therapeutic experience, honoring all patients' right to privacy and treatment, and protecting the safety of all patients, staff, and visitors.

This policy also identifies security procedures for all visitors entering either the Forensic Mental Health Facility (FMHF), or the Montana State Hospital (MSH). For the purposes of this policy, the D-wing of the MSH shall be managed in the same fashion as the FMHF.

II. POLICY:

- A. All patients have the right to visitation unless a patient's treatment team imposes special restrictions in writing when such restrictions are clinically indicated. The restrictions must be reviewed periodically to see if they need to be continued. For patients housed at FMHF and MSH/D-wing, visitation involving individuals who are not members of the patient's immediate family may require pre-approval by the patient's treatment team.
- B. We will make every effort to accommodate visitors when clinically appropriate. Normal visiting hours are from 9 a.m. to 8 p.m., seven days a week.
- C. Visits from family members, friends, and other supportive individuals may enhance the treatment provided to patients and increase the prospect for the patient's successful return to the community. We reserve the right to place conditions on visitation to prevent interference with patient treatment, which may disrupt the therapeutic milieu, and to minimize risk to staff, patients, or visitors.
- D. The FMHF, along with D-wing at MSH, primarily serves individuals currently under forensic commitments who have been 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 shall be

maintained in the FMHF as well as D-wing at MSH to provide appropriate safety for patients, employees, and the public, and to reduce the risk of unauthorized leave.

E. All patients have the right to refuse visitors.

III. DEFINITIONS:

A. **Visitors:** Visitor means anyone who is not a patient or staff, including family, friends, clergy, spiritual counselors, attorneys, physicians, and representatives of the Board of Visitors or an advocate as required by 45 CFR § 1326.21, who wish to visit patients while they are hospitalized.

Some restrictions listed below do not apply to visits with patient's attorney, advocate, or legal representative.

B. **Visiting Guidelines:** Visiting guidelines are provided to each visitor to promote understanding of:

1. The behaviors expected from each visitor;
2. Expectations of patients during visits;
3. Expectations the visitors can have of hospital staff to support a therapeutic and productive visit.

C. **Contact Visitation:** Allows "face-to-face" encounters between the patient and visitor.

D. **Non-Contact Visitation:** Held in a secure location with a physical divider separating the patient and visitor.

Patient and visitor safety concerns shall determine which type of visitation shall be approved. Each unit may adopt a level system which includes the opportunity for each patient to advance from non-contact to contact visits as treatment needs allow and safety needs are met.

E. **Visitor Identification Badge:** Upon arrival and check-in, each visitor shall be provided a dated visitor's identification badge. All visitors must always display this badge in plain view on the front upper left quadrant of their torso. At the end of the interaction with patients, the visitor shall return the badge to the staff member where the visitor initially checked in. In an effort to protect the privacy of patients, all visitors, (18 years or older) must present a valid, government issue photo identification card at the time of check-in.

F. **Main Hospital:** Includes treatment units A-wing, B-wing, D-wing, E-wing, Spratt, and the Mental Health Group Homes (MHGHs) located on the MSH hospital campus, Warm Springs, MT.

- G. **Forensic Mental Health Facility (FMHF/F-wing):** MSH forensic facility located at Galen, MT 5 miles north of Main Hospital on frontage road.
- H. **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.
- I. **Contraband:** Any item(s) posing a danger or hazard to any individual of which patients are prohibited from owning, purchasing or having in their possession during their admission at the MSH/FMHF. Contraband items can include, but are not limited to, tobacco products, lighters or matches, weapons of any kind, illicit drugs or narcotics, explosives, ropes, unprescribed medication, cellular phones, mechanical tools, any key or other implement designed to manipulate a locking device, other sharps such as needles, glass containers, straight or safety pins, scissors, razors, metal nail files, cans, combs, 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.
- J. **Body Search:** Commonly referred to as a “pat search” or “pat down”. These searches encompass a physical inspection of the entire body, while fully clothed. The search will begin at the head and continue down the entire body all while strategically “patting” the surface of all body locations to determine if the individual possesses contraband. When at all possible, “pat searches” should be conducted by a staff member the same gender as the individual to be searched.

IV. RESPONSIBILITIES:

A. Main Hospital/MHGHs/FMHF:

1. **Social Workers:** Informs the patient and patient’s family of this policy to improve understanding of the patient visitation process and to maximize appropriate access.
2. **Licensed Independent Practitioner:** Evaluates and writes orders as needed related to special circumstances as outlined in this policy.
3. **Program Managers and Nursing Supervisors:** Responsible for ensuring patient visits occur as provided under this policy. The Program Manager or Nurse Supervisor is also responsible to ensure the treatment team is aware of and honors the patient’s right to refuse visitors.

4. **Unit/MHGH/Pod Staff:** Documents the patient visit in the medical record, including who visited, relationship to patient, duration, location, and any other pertinent facts about the visit.
 5. **Security Officers:** Monitor safety and security on the unit as needed or requested, monitor compliance with safety policies, and respond to patients who may demonstrate unsafe behaviors or violation of security policies.
 6. **Inter-Perimeter Security Team:** A Department of Corrections specialized intervention team which may be called on to assist with the management of unsafe behaviors or security emergencies.
- B. Main Hospital/MHGHs:** In addition to those listed in “A” above.
1. **Front Desk Staff:** Are responsible for:
 - a. signing in each visitor, reviewing the Main Hospital/MHGH Visitor Agreement (attachment A) and obtaining the visitor’s signature,
 - b. notifying treatment unit/group home staff,
 - c. securing unit/group home clearance for the visit,
 - d. confirming patient consent,
 - e. providing a locker for disallowed items,
 - f. issuing a visitor badge.

To ensure the safety of all staff and patients, visitors (adults only 18 years or older) must present valid, government issued photo identification at the time of check-in.
 2. **Psychiatric Technicians (Psych Tech):** Identify each visitor, ensures the visitor has signed in at the front desk, clears the visitor, confirms patient consent, ensures disallowed items are placed in provided locker or locked in the visitor’s car. Techs are responsible for reviewing and accounting for items given to the patient. Items will be located at the front desk until reviewed by a psych tech. Any property or money received will be recorded and managed as required by MSH Policy AD-03, “Management of Patient’s Personal Effects”.
- C. MSH D-wing / FMHF (F-wing):** In addition to those listed in “A” above.
1. **Lobby Staff:** Identify each visitor before allowing the visitor into the building and notifying Forensic Mental Health Techs (FMHTs) to meet the visitor in the lobby area. All individuals who wish to visit patients at the FMHF shall be identified by presenting staff with a valid government issue photo identification card at check-in.

2. **Forensic Mental Health Technician:** Identify each visitor, ensures the visitor signs the visitor's log book and the FMHF Visitor Agreement form (attachment B), notifies pod staff, clears the visitor by hand wand and/or metal detector, confirms patient consent, and provides a locker for disallowed items. FMHTs are responsible for reviewing and accounting for items given to the patient. Any property or money received will be recorded and managed as required by MSH Policy AD-03, "Management of Patient's Personal Effects".

V. PROCEDURES: Main Hospital/MHGHs/FMHGs.

A. Expectations of Visitors: All visitors are expected to meet the following expectations:

1. If possible, call in advance to allow adequate time for staff to identify visit times which do not interfere with scheduled treatment time and to confirm patient's acceptance of visit.
2. Check in at Main Hospital front desk or the FMHF (F-wing) lobby, identify themselves, and sign the visitor's log book.
 - a. The visitor is required to enter their full name, address, phone number, the time of arrival, the patient they wish to visit, and reason for visit in the visitor's log book. Visitors have a responsibility to give accurate identifying information prior to visiting a patient and to identify in advance the patient they wish to visit, as well as the purpose of the visit. This information will be used as the basis to clear the visitor to visit in either the contact or non-contact visiting room, and to secure the patient's advance permission for the visit.
 - b. To ensure the safety of all staff and patients, visitors (adults only 18 years or older) must present valid, government issued photo identification at the time of check-in.
 - c. Visitors are required to sign an acknowledgement indicating they have reviewed the visiting guidelines and Visitor's Agreement form, and will abide by them.
 - d. Cooperate with staff directions and requests.
3. Visitors will not bring contraband into the facility. Any exceptions to contraband items must be approved by the hospital administrator or designee.
4. Visitors under the age of 18 must be accompanied by an adult. Children under the age of 18 are not allowed on treatment units without Licensed Independent Practitioner approval. Visitors with children under the age of 18 visiting a forensic patient will require Licensed Independent Practitioner approval to allow the children in the visiting room.

5. Visitors are required to wear clothing and accessories appropriate for the hospital setting and do not cause concern for the safety of the patients and/or other visitors. Clothing must be respectful of all patients, visitors, and staff who interact with the visitor. Any disrespectful, immodest, or unsafe clothing item/accessories are prohibited. Visitors may be asked to “cover up” questionable clothing or reschedule their visit if their clothing exposes midriffs, chests, cleavage, buttocks or upper thighs when sitting or standing. Refusal to comply with the above guidelines may result in visits being denied, restricted, terminated and may result in the loss of visiting privileges.
 - a. All clothing items should be neat, clean, well-fitting, not “snug” or form/tight fitting, nor “baggy” or excessively loose fitting. Visitors should utilize undergarments under all clothing as well.
 - b. Clothing cannot have excessive (more than ½ inches and/ or exposing flesh) tears/rips, frays (regardless of intended design), reveal undergarments, or display messages or pictures which are inappropriate to the treatment setting (for example: clothing with logos for alcoholic beverages or tobacco products).
 - c. Garments used on the upper body must cover the midriff, have a modest neckline, and have sleeves. “Tank” or “Halter” style tops are prohibited for any visitors above the age of 12 years old. Dresses, skirts, or capris must be knee to ankle length and worn with leg coverings. Shorts of any kind are prohibited for any visitors above the age of 12 years old.
- B. Staff will instruct visitors to declare the item(s) they wish to give to the patient at the time of visitor registration. If visitors give item(s) to a patient without first declaring the item at registration, the visit may be discontinued, and/or future visits restricted. Visitors may leave the following items for the patient with staff at the Main Hospital front desk or FMHF (F-wing) lobby:
 2. Main Hospital/MHGH:
 - a. Money
 - b. Phone cards
 - c. Books
 - d. Puzzles
 - e. A battery-operated electric razor, new, in the original manufacturers packaging.
 - f. Clothing appropriate for the facility, the patient’s level, and which does not exceed the clothing limit. All authorized clothing left at the front desk shall be searched by unit staff before delivery to the treatment unit.

3. FMHF (F-wing) and D wing:
 - a. Money
 - b. Phone cards
 - c. Clothes deemed appropriate for the facility, the patient's level, which does not exceed the clothing limit. All authorized clothing left with FMHF staff in the lobby shall be searched by FMHF staff before delivery to the pod.
 - d. Personal owned electric razors are allowed, with F-wing approving only battery-operated devices, and D-wing approving both electric and battery-operated devices.

All patient property items received after-hours or on weekends shall be inventoried and placed into secure storage until reviewed by the patient treatment team the following business day. Upon approval by the treatment team, the property shall be provided to the patient.

- C. Staff will ask visitors who are intoxicated, abusive, or otherwise disruptive to a patient's treatment or safe operation of the facility to leave the grounds immediately. Security personnel are available to provide assistance should a need for additional staff resources be identified. Staff members involved must fully document any such incident in the patient's medical record, and on an incident report. Nursing managers and/or house supervisors shall be contacted immediately and shall respond to the location of the disruptive visitor. Onsite managers shall request local law enforcement respond in the event the visitor refuses to leave the campus or becomes a threat to the orderly operation of the facility and/or a danger to staff and patients. Any instances such as described above shall be reported to the hospital administrator or designee immediately, who in turn shall provide authorization for further staff action such as the involvement of local law enforcement.
- D. Visiting hours are from 9 a.m. to 8 p.m., seven days per week. Staff members will inform visitors of the patient's need to participate in scheduled activities and the times when the patient will be available. Visits will be scheduled at times which do not interfere with the patient's scheduled treatment programs or meals, unless unique circumstances exist and are approved by the treatment team. To protect all patients' privacy, visits will occur in designated visitation areas, which will be identified at the time of the visit.
- E. Patients have the right to refuse visitors or discontinue the visit at any time. When a patient refuses a visitor, staff from the patient's treatment program will explain the circumstances to the visiting party and document in the medical record the visitor's identity and the patient's refusal.

- F. Main Hospital front desk or FMHF (F-wing) lobby staff will provide the visitor with a “Visitor’s Agreement” form for review and signature. After receiving the signed “Visitor’s Agreement” form from the visitor accepting Main Hospital/F-wing visiting guidelines, the front desk/lobby staff will provide the visitor with a dated visitor badge and ensure it is in plain view on the front upper left quadrant of their torso. The front desk/lobby staff will direct the visitor to the location of the visit. If necessary, the visitor will be escorted to the visit location.
- G. In the instance any visitor refuses to sign the visitation guidelines they shall NOT be allowed to visit any patient at the hospital. An incident of this nature shall be immediately reported to the onsite supervisor and hospital administrator during business hours, and the designated MSH “on-call” administrator after-hours or on weekends.

H. **Visiting Areas:**

1. **Main Hospital/MHGH:** Include visiting rooms available on or near each unit. The Main Hospital Rotunda and the outside area adjoining the Rotunda may be used for visiting. Other accommodations will be made available as needed. Visits may not take place in a group home, patient room, observation room, or in seclusion and restraint areas, unless specifically ordered by the treating Licensed Independent Practitioner as medically necessary. Licensed Independent Practitioners may authorize visits on campus or at the canteen. Patients may be subject to a search before returning to their unit.

Visitors wishing to take a civilly committed patient off-grounds must make advance arrangements with the patient’s treatment team. A documented Licensed Independent Practitioner’s order is required for off-grounds visits.

All visiting areas may be monitored visually for safety purposes. In all cases, the privacy rights of other patients must be respected.

2. **D-wing of Main Hospital:** Visiting room allows for both contact and non-contact visits depending on the patient’s level and the treatment team’s assessment of their safety.

All visits are monitored with the video system for safety, security, and appropriate behavior.

Patients returning from the contact visits will have a clothed body search and may be required to clear the metal detector and/or the hand-held metal detector.

3. **FMHF (F-Wing):** Includes two non-contact visiting rooms and one contact visiting room. Patients may be authorized to have a contact visit in the

designated contact 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.

- a. Non-adjudicated patients will have non-contact visits. Adjudicated patients at a level one or level two will have non-contact visits.
- b. Adjudicated patients at a level 3 or higher may have contact visits per treatment team discretion.
- c. Visits may not take place in individual rooms, observation rooms, or in seclusion and restraint areas, unless specifically ordered by the treating Licensed Independent Practitioner as medically necessary.
- d. Visitors will be escorted through the rear sally port to the visiting room.

Patients returning from the contact and non-contact visiting room will have a clothed body search and may be required to clear the metal detector and/or the hand-held metal detector before returning to their assigned housing area.

- I. Staff members will make reasonable efforts to meet with visitors when requested. Visitors should schedule appointments with staff in advance whenever possible. No employee may disclose Protected Health Information or private information about any patient without appropriate written authorization for each patient involved. Any employee may decline to meet with a visitor when in the employee's professional judgment such a meeting would be inappropriate. In the event an employee refuses to meet with a visitor the staff member shall complete an incident report which outlines the rationale for the refusal. These reports shall be routed through the staff members chain of command. Employees who have concerns about a request for a meeting with a visitor are instructed to seek supervisory guidance.
- J. Visitation by Family, Friends, and the Media (Reporters):
 1. Visitors to the Main Hospital, MHGHs, and FMHF/F-wing will be asked to limit what they bring to patient visits. Items which are readily available and safe in the community setting can be used in harmful or injurious ways inside the hospital setting. Therefore, for the safety of all patients, the hospital provides a list of approved items for patients to receive as gifts. Visitors will be required to secure the following items in locked personal vehicles or store items in the secure lockers located at the Main Hospital front desk/F-wing lobby area:
 - a. Backpacks, briefcases, purses/handbags, cameras, cell phones, diaper bags, coats, car keys, jackets, any recording device, tobacco or vaping

products, lighters, matches, weapons of any kind, alcohol, illicit drugs, over the counter medication, vitamins, prescription medication, sharps such as needles, straight or safety pins, scissors, razors, metal nail files, letter openers, and similar items.

- b. Visitors may bring food items and beverages into the rotunda area and Spratt visitation room only (food items are not allowed at the FMHF). All food and drinks must be screened by front desk staff prior to admission into the hospital. Food and drink items may not be shared with other patients who are not involved in the visit. Food and drink containers may not be glass, or metal, nor shall any form of metal utensils be utilized during the visit. Food and drink items may not contain excessive stimulants such as caffeine, “energy drinks”, or any form of alcohol.
2. Visitors will be informed it is a criminal offense to aid in the escape of a forensic patient and/or elopement of a civilly committed patient per M.C.A. §53-1-102, and to bring in alcohol or drugs to any MSH patient per M.C.A. §53-1-103.
3. Members of the media who wish to visit patients must submit a request to visit through the DPHHS Public Information Office. Once the request is received, the patient’s treatment team shall be consulted to determine the impact, if any, the visit with the media member shall cause. If the treatment team determines the visit may occur, the media member is required to comply with all provisions of this policy before, during, and after the visit. The failure of the media member to comply with these regulations is grounds for the visit to be denied prior or terminated during the event.
4. Termination of the visit will occur in the event of inappropriate behavior, including, but not limited to: sexual contact, alcohol and/or drug use, threatening or assaultive/aggressive behavior.
5. The treatment team reserves the authority to deny a visit for safety or treatment reasons.
6. MSH/D-wing: In addition to items 1 through 5 visits are subject to the following:
 - a. Visitors of forensic patients will be required to clear the hand-wand and/or the metal detector prior to entering the unit for the visit.
 - b. Patients may be authorized to have a contact visit in the designated visiting room or a non-contact visit through the visiting room window,

- depending on their level and the treatment team's assessment of their safety.
- c. All visits will be monitored with the video system for safety, security, and appropriate behavior.
 - d. Visitors other than attorneys, clergy, physicians or other mental health professional persons, will not be allowed to bring any items for patients into the visiting room.
 - e. Coats and handbags must be stored in provided lockers or locked in a personal vehicle.
 - f. Cell phones and recording devices are not allowed in the visit.
 - a. Cameras may be used to photograph patients and visitors however the device must be declared at the front desk during admission, and staff must be present during the use of the camera. Photographs may not be taken at any location other than the C-203 conference room.
 - g. All visitors are subject to having any handbags, briefcases, or backpacks searched by MSH staff.
 - h. The forensic treatment team may place conditions on the visits (such as non-contact) of patients for the purpose of maintaining safety and preventing the introduction of contraband on the unit.
7. FMHF/F-wing visitors: In addition to items 1 through 5 visits are subject to the following:
- a. Patients may be authorized to have a contact visit in the designated visiting room or a non-contact visit in a specialized non-contact visiting room depending on their level and the treatment team's assessment of their readiness to be safe during visits.
 - b. All visits will be monitored with the video system for safety, security, and appropriate behavior.
 - c. Upon arrival and check-in at the FMHF, each visitor shall be provided a dated visitors identification badge. All visitors must display this badge at all times in plain view on the front upper left quadrant of their torso. At the conclusion of the interaction with patient, the visitor shall return the badge to the staff member where the visitor initially checked in.

- d. 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.
 - e. Patients have a right to refuse visits.
 - f. Visits will occur during facility visiting hours.
 - g. Visitors shall clear the metal detector and/or hand wand search before any contact or non-contact visits will occur. In the event FMHF/F-wing staff develop concern the visitor may be in possession of an unauthorized item, they shall request a second staff member, preferably of supervisory level, respond to the area. Upon arrival, both staff shall communicate the concern to the visitor and provide them an opportunity to resolve the concern. If the visitor addresses the issue appropriately, the visit may occur. If the visitor does not or refuses to interact with the staff to address the concern, the visit shall be denied, and the incident documented in detail in the patient's medical record, and on an incident report. MSH management (unit manager during business hours, house supervisor after business hours and on weekends) shall be notified of this type of incident immediately.
 - h. Staff will ask visitors who are intoxicated, abusive, or otherwise disruptive to a patient's treatment or safe operation of the facility to leave the grounds immediately. Security personnel are available to aid should a need for additional staff resources be identified. Local law enforcement shall be contacted, and a response requested to address any visitor who meets the description above, and who refuses to depart the hospital grounds.
 - i. The treatment team reserves the authority to deny a visit for safety or treatment reasons.
 - j. Before returning to an assigned housing area, 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.
- K. Visitation of patients at the Main Hospital/MHGHs, and FMHF/F-wing by Attorneys, Clergy, Physicians, and Mental Health Professionals:

1. Visitors may bring ONLY authorized materials necessary for the purpose of the visit:
 - a. Cell phones, cameras, and recording devices are not allowed in the visitation area/room.
 - b. Coats, purses, handbags, briefcases, and backpacks are not allowed in the visitation areas.
 - i. If visitors claim to have materials in their handbags, briefcases, or backpacks necessary for the visit, staff shall search these items prior to allowing the visitor access to the visitation area.
 - c. No food or drinks are allowed in the visitation rooms/areas with the exception of the Spratt visitation room.
 - d. Any item, defined under this policy as contraband, brought into any hospital location by legal, clergy, physicians or mental health professionals shall be subject to seizure and the visit shall be immediately denied and/or terminated.
 2. Visitors who are entering D-wing or F-wing are required to clear the hand wand and/or the metal detector before the visit.
 3. Upon the request of either party participating in these types of visitation events audio output from visitation rooms may be disabled during the meeting.
 4. Visitors shall notify MSH staff of the patient they wish to visit upon arrival and complete all required documentation prior to the visit being approved. Visits of this type shall occur only in authorized areas identified by MSH staff. These visitation areas must afford privacy during the visit should the request for such be made by either individual involved in the visit.
- L. Visitation by Designated Protection and Advocacy Systems (DRM):
1. Please refer to MSH Policy ADM-13, Access to Patient & Treatment Areas by Designated Protection & Advocacy System.
- M. Visitation by Mental Disabilities Board of Visitors Staff (BOV):
1. Please refer to MSH Policy ADM-14, Access to Patient & Treatment Areas by Mental Disabilities Board of Visitors staff.
- N. **Past Staff Visitation:** In addition to all other requirements, visits by former staff members are subject to the following:

1. Former MSH staff may submit a request to visit patients. The treatment team will review the request and make a recommendation to the hospital administrator who will make a final decision whether to allow the visit.
 2. A patient's treating Licensed Independent Practitioner may place limits on scheduling, supervision, or other conditions on a patient's visit due to interference with treatment concerns for safety of the patient, staff, or the public.
- O. **Former Patient Visitation:** To support a therapeutic environment and promote recovery and independence, recently discharged patients will not be allowed to visit current patients or staff for 180 days following their discharge. Once the 180-day period has passed, if the former patient wishes to visit a current patient they will be asked to submit a written request to the patient's treatment team and/or the hospital administrator. Discharged patients who submit a request to visit should allow at least one week for review of the request. Staff will review this expectation with all discharging patients. In the event a recently discharged patient has a family member admitted, the treating Licensed Independent Practitioner may authorize a visit by the recently discharged patient if such a visit is judged to be beneficial to current patients. At the MSH the Licensed Independent Practitioner will note the authorization in the medical record and communicate the same to the treatment team, the house supervisor, the front desk, and security. At FMHF the Licensed Independent Practitioner will note the authorization in the medical record and communicate the same to the treatment team, the nurse/program manager, main control, and security manager.
- P. All gift items provided to patients at the Main Hospital/MHGHs by their visitors must be screened by MSH staff to address any possible safety and security concerns the item may present. Staff will instruct visitors to declare the item(s) at the time of visitor registration. If visitors give items to a patient without first declaring the item at registration, hospital management (unit manager during business hours, house supervisor after business hours and on weekends) may discontinue the visit and/or restrict future visits.
- Q. Facility or security staff reserve the right to search visitors and their possessions prior to entering any hospital location. Gift items given to the patient will be checked by unit staff for contraband or other hazards. Any property or money received by a patient will be recorded and managed as required by MSH Policy AD-03, Management of Patient's Personal Effects. Any MSH patient may be searched before or after a visit.
- R. A patient's treating Licensed Independent Practitioner may place limits on scheduling, supervision, or other conditions on a patient's visit due to interference with treatment or concerns for safety of the patient, staff, or the public. Visitation

conditions must be documented in the patient’s progress notes, or in the patient’s treatment plan, and reviewed during the patient’s treatment plan review. Staff shall attempt to contact any person prohibited from visiting to inform them of the decision and subsequent restrictions.

Visitation restrictions and/or limitations imposed for treatment, safety and security purposes may not interfere with the right of a patient to receive visits from attorneys, clergy, spiritual counselors, private physicians, staff of the Board of Visitors, staff and authorized agents of a designated protection and advocacy system. Auditory privacy will be preserved for such visits upon the request of any parties involved.

- S. Visitors may bring food items and beverages into the rotunda area and Spratt visitation room only. All food and drinks must be screened by front desk staff prior to admission into the hospital. Food and drink items may not be shared with other patients who are not involved in the visit. Food and drink containers may not be glass, or metal, nor shall any form of metal utensils be utilized during the visit. Food and drink items may not contain excessive stimulants such as caffeine, “energy drinks”, or any form of alcohol. Food or drink items are not allowed during visits at the MSH/ D-wing visitation room, and FMHF/F-wing all locations.

- VI. REFERENCES:** M.C.A. 53-21-142(3), Rights of Persons Admitted to Facility.
- VII. COLLABORATED WITH:** Medical Director, Director of Nursing, Associate Director of Nursing, Director of Health Information, Director of Clinical Services, Chief Financial Officer, Director of Quality Assurance, Human Resources Director, Fire/Safety Officer, FMHF Program Manager, FMHF Safety Officer, D-wing Program Manager, D-wing Nurse Supervisor and DPHHS Office of Legal Affairs.
- VIII. RESCISSIONS:** AdM-08, *Patient Visitation* dated August 16, 2019; ADM-08, *Patient Visitation* dated August 10, 2019; ADM-08, *Patient Visitation* dated September 5, 2014; ADM-08, *Visitors* dated November 16, 2012; ADM-08, *Visitors* dated July 13, 2009, ADM-08, *Visitors* dated August 28, 2006; ADM-08, *Visitors* dated June 4, 2004; ADM-08, *Visitors* dated May 22, 2001; ADM-08, *Visitors* dated February 14, 2000; H.O.P.P ADM-01-96-R, *Visitors*, dated September 1, 1996.
- IX. DISTRIBUTION:** MSH Electronic policy and procedure manual; MSH Website policy manual.
- 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:** Hospital Administrator.

XII. ATTACHMENTS: The following documents are attached and considered part of this policy:

- A. MSH Main Hospital and Mental Health Group Home Visiting Guidelines.
- B. Visitor's Agreement for D-unit and Forensic Mental Health Facility (FMHF).

Signature:

Kyle Fouts
Hospital Administrator

**Montana State Hospital
Main Hospital and Mental Health Group Home
Visitor Agreement**

Visits from families and friends are important for patients at Montana State Hospital. Visits can help promote recovery and support family and social relationships outside of the Hospital setting. To promote a safe and therapeutic environment for all persons, we have established the following guidelines for visiting patients at Montana State Hospital.

1. Visiting hours are 9am to 8pm, seven days per week.
2. Visitors wishing to take a patient off-grounds must make arrangements in advance with the patient's treatment team.
3. Visitors must check in and complete all necessary paperwork at the front desk in the main hospital building to receive a visitor's badge. Visitors are always required to wear it on the front of their clothing in the upper left quadrant during the visit and return the badge to the front desk at the end of the visit. To ensure the safety of all staff and patients, visitors (adults only 18 years or older) must present valid, government issued photo identification at the time of check-in.
4. Montana State Hospital is a Tobacco / Nicotine Free Hospital and Campus.
5. Backpacks, briefcases, purses, cameras, cell phones, diaper bags, coats, recording devices, tobacco or vaping products, lighters, matches, weapons, alcohol, illicit drugs, vitamins, prescription drugs, sharps such as needles, glass, straight or safety pins, scissors, razors, metal nail files, cans, letter openers, and similar items may not be brought to visits. MSH will provide a locker for these items for the duration of the visit.
6. Visitors may bring food items and beverages into the rotunda area and Spratt visitation room only. All food and drinks must be screened by front desk staff prior to admission into the hospital. Food and drink items may not be shared with other patients who are not involved in the visit. Food and drink containers may not be glass, or metal, nor shall any form of metal utensils be utilized during the visit. Food and drink items may not contain excessive stimulants such as caffeine, "energy drinks", or any form of alcohol.
7. Patients are not allowed to ride in or enter personal vehicles during visits. Montana law (§ 53-1-102, MCA) states the removal of patients from state institutions without authorization is a criminal offense.
8. Montana law (§ 53-1-103, MCA) states distribution of alcoholic beverages or drugs to patients at state institutions is a criminal offense.
9. Visits may not interfere with patient treatment or scheduled therapeutic activities.

10. Please inform staff at the front desk if you have gift items for the patient. All gift items must be preapproved by staff.
11. If visitors wish to meet with a member of the treatment team visitors should call and schedule an appointment in advance of the patient visit.
12. Visits with any pets are discouraged. Animals designated as a pet are not allowed inside any building on the hospital campus. Pets are only allowed if approved by the patient's attending Licensed Independent Practitioner/Treatment Team. If pet visitation is approved, the visit must occur in the designated area, and owners are responsible for attending to the pet to include cleaning up waste during and after the visit is concluded.
13. Minor children visiting patients must always be supervised by an adult. Children who are under the age of 18 require prior approval of the treatment team before visitation will be allowed.
14. Visitors should be aware most areas on campus are monitored by a CCTV system.
15. Patients have a right to refuse visits.
16. If space cannot be made available for a visit or if a patient is involved in therapy at the time of the visit, staff will attempt to identify an alternate location or time for a visit.
17. Visitors are required to respect the privacy and confidentiality of other patients / visitors when visiting at the Montana State Hospital.
18. Visitors are required to sign an acknowledgement indicating they have reviewed the visiting guidelines and Visitor's Agreement form and will abide by them.

Please ask any staff member if you require assistance. If you have a concern, please let a staff member know. Our goal is to provide each patient with the best possible care and treatment. Visitor's observations and feedback are important to us.

More information about the Hospital and Montana's public mental health system can be found on Montana Department of Public Health and Human Services website at www.dphhs.mt.gov.

Patient Name:

Patient MSH number:

Signature:

Date:

Driver's License/ID:

Previous Patient: Yes No

Montana State Hospital Visitor's Agreement for D-unit and Forensic Mental Health Facility (FMHF)

Please read through these rules and expectations. Sign at the bottom of the page that you understand these expectations and are willing to follow them.

Visits from families and friends are important for patients at Montana State Hospital. Visits can help promote recovery and support family and social relationships outside of the Hospital setting. To promote a safe and therapeutic environment for all persons, we have established the following guidelines for visiting patients at Montana State Hospital.

1. Visitors are welcome daily between 9 am and 8 pm, except for meal times and shift change, which is 2:45pm to 3:15pm.
2. Visitors must check in at the front desk/lobby and document on the visitor's log book their full name, phone number, address, the time of arrival, the patient they wish to visit, and their relationship to the patient.
3. Visitors must obtain a visitor's permit at the front desk and wear it on their upper chest area. ***Visitor's will also be expected to show a valid governmental photograph identification source at time of signing in for visit.***
4. Visitors have the responsibility to give accurate identifying information prior to receiving access to see a patient and to identify in advance the patient(s) you wish to visit as well as the purpose of your 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 you for your visit onto the Unit and it will also be used to secure the patient's advance permission for your visit.
5. Food and drink items are not allowed during visits with patients who cannot access the rotunda visitation area, or who are assigned to the F-wing.
6. Contraband items are not allowed at FMHF or on D unit. These items include, but not limited to, backpacks, briefcases, purses, diaper bags, cell phones, cameras or any recording devices, chew, tobacco, cigarettes or vaping products, lighters or matches, weapons of any kind, alcohol, illicit drugs or narcotics, vitamins or prescription drugs, other sharps such as needles, straight or safety pins, scissors, razors, metal nail files, combs or letter openers, plastic bags, shoes with laces, high heels, or steel toed boots, any food or drink items. You must leave listed items in a locked vehicle, or you will be provided with a locker for these items for the duration of your visit.
7. If children under the age of 18 are accompanying the visitor, the visit must be approved by the treatment team ***prior to the visit***, and an order must exist in the patient's file. The children may not be left unattended and must be supervised at all times by an adult.
8. Visitor's should be aware that for safety reasons, the areas you will be given to visit at FMHF are monitored by a video and audio monitoring system. Visiting on D unit will have video monitoring.
9. The patient you want to visit may not be available if visitation was not scheduled ahead of time due to the unit activity or a treatment team decision. The treatment team reserves the right to deny or terminate a visit for safety or treatment reasons. Montana State Hospital reserves the right to place conditions on visits to prevent interference with patient treatment or minimize the risk to staff, patient, or visitor. Patients also have the right to refuse a visit.

10. Visitors are asked to respect the privacy and confidentiality of other individuals and not share any personal information or knowledge acquired about other patient while visiting.
11. If you or the patient engage in inappropriate behavior such as aggression, smoking or chewing, sexual contact, using alcohol or drugs, behaving in a threatening manner, or sneaking in contraband or items not allowed, or any other behavior deemed unsafe or inappropriate, your visit will be terminated. This could result in a termination of any visits or termination of any contact visits for the duration of the patient's admission.
12. Visits with pets are discouraged. Animals designated as a pet are not allowed inside any building on the hospital campus. Pets who accompany visitors must be approved by the assigned treatment team prior to the visit. Pets who are approved to visit must remain in designated areas, and owners are responsible for attending to the pet to include cleaning up waste during and after the visit is concluded.
13. If you brought items in to your visit, you must leave them at the front desk. The only items that will be accepted will be money, appropriate clothing, electric or battery-operated razor, and phone card. Staff will pick these items up from the front desk and bring to unit.
14. Patients are not allowed to **ride in or enter** personal vehicles during visits. Montana law (53-1-102, MCA) prohibits removal of patients from state institutions without authorization. A person who permits or assists a patient in leaving MSH without authorization may be prosecuted.
15. Montana law (53-1-103, MCA) prohibits distribution of alcoholic beverages or drugs to patients at state institutions. Individual may be prosecuted if this is violated.
16. Montana State Hospital is a tobacco free Hospital and Campus. Patients are not allowed cigarettes, vaping devices, lighters, matches, chew, snuff, etc. Patients, staff and visitors are not allowed to smoke or chew anywhere in the hospital or anywhere on hospital grounds.
17. You will be required to pass through the metal detector and hand wand before entering the visiting room.
18. Contact visits are for patients that are adjudicated and with a level 3 or higher, otherwise your visit will be through a window. Level 7-10 may use their leisure pass to visit on campus in non-restricted areas if it is a family member, otherwise they may visit in the D Unit visitors' room. Visits with non-family members will be conducted in the Rotunda, unless LIP and treatment team approve otherwise.

Please ask any staff member for assistance if needed. If something does not look right or you have a concern, please let a staff member know. Our goal is to provide each patient with the best possible care and treatment. Visitor's observations and feedback are important to us.

More information about D-Wing, FMHF and Montana's public mental health system can be found on Montana Department of Public Health and Human Services website at www.dphhs.mt.gov.

Name:

Date:

Relationship:

Driver License/ID:

Name:

Relationship:

Name:

Relationship:

Patient:

MSH Number: