

Patient and Family Handbook

WESTERN STATE HOSPITAL

Washington State Department of Social and Health Services

Transforming
Lives

A Handbook for Patients and
Families on the Road to Recovery



Welcome to Western State Hospital.

This handbook is a reference guide for practical information about the hospital. Its goal is to help you find your way around Western State Hospital and to assist you as you work with your treatment team to realize the benefits of recovery.

People do recover from mental health challenges. Patients and their families have a unique path to wellness, health, and recovery. We hope this handbook provides the information you need to actively participate in your recovery journey and that it will be a touchstone to help you better understand:

- Your rights and responsibilities
- Getting the help and services you need
- The court system and the civil commitment process
- The forensic commitment process
- Tools and resources to further your recovery and resiliency

While you may not have chosen to be at the hospital, our goal is to help you travel the road to recovery. We hope to provide you with new ways to make choices that support your health and well-being.

Please be open to the ideas presented in your classes and groups. Education is a key part of the recovery process and we want to partner with you in your mental health care.

Sincerely,

The Patient and Family Education Subcommittee



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Introduction

About the Hospital

Western State Hospital (WSH) is an inpatient psychiatric hospital that is certified by the Federal Centers for Medicare and Medicaid Services. With more than 800 beds and 1,800 employees, WSH is one of the largest psychiatric hospitals west of the Mississippi. It is located in Lakewood, Washington, seven miles south of Tacoma.

WSH is one of two state-owned psychiatric hospitals for adults in Washington and provides services to individuals in 20 western Washington counties. Eastern State Hospital, the other state-owned psychiatric hospital for adults, serves 18 counties in eastern Washington.

WSH provides evaluation and inpatient treatment for individuals with serious or long-term mental illness. Patients are referred to the hospital through the Regional Support Network (RSN), the civil court system when individuals meet the criteria for involuntary treatment (RCW 71.05) or through the criminal justice system (RCW 10.77).

What to Expect During a Stay at Western State Hospital

A team of psychiatrists, psychologists, social workers, nurses and other trained professionals work together to provide individual care and assistance with recovery. The team develops a treatment plan for each patient to address patient and family needs, the social environment, medical care needs, and vocational and legal issues. Families are encouraged to participate with the patient's consent. Medical responsibility is maintained through 24-hour physician and registered nurse coverage.

Treatment Does Not Stop When a Patient Leaves the Hospital

Continuing care is a vital part of the recovery process and a big part of the treatment plan. Western State Hospital collaborates with outpatient mental health services provided in the community to ease the transition from hospitalization to home and a work environment. Patients and family members are encouraged to actively participate in their treatment and recovery plan.

WSH Mission and Vision Statements

Western State Hospital Mission: To promote recovery and well-being in partnership with people we serve.

Our Vision: We are a dynamic community that supports people in their healing and recovery. We promote personal and professional growth, research, and innovation. Our work with each other is guided by the following values:

Safety

WSH provides a healing environment free from danger, fear, hurt, injury, coercion, or intimidation for people with psychiatric disabilities. Seclusion and restraint practices are used only to ensure safety when other measures fail. Through vigilant attention and continuous effort, WSH ensures a safe haven where all in its care experience trust.

Recovery

Recovery is an evolving, nonlinear, highly individualized process that is founded on hope and leads to healing and growth. Principles of recovery guide our efforts.

Hope

Hope – trust in the capacity for healing and growth – is the essential spark that ignites recovery.

Respect

We honor the personal worth and dignity of every human being. We value diversity and respect individual choice.

Relationship

Person-to-person kindness, politeness, compassion, respect, empathy, and a spirit of fun characterize interactions within the WSH community. We recognize the importance of extending beyond the boundaries of oneself to invite belonging.

Strengths

All people with psychiatric disabilities possess unique personal qualities and gifts. When recognized, valued and supported, these gifts open doors to recovery. We acknowledge that the hospital's most valuable resources are the knowledge, skill, and compassion of its staff.

Innovation

Freedom and support to apply knowledge and resources creatively to empower people with psychiatric disabilities leading to a speedier, more effective recovery process.

Best Practices

Proven practices and the best available research determine service design and delivery. Treatment incorporates best practice guidelines.

Accountability

The WSH community holds each staff member responsible to provide and continuously monitor the effectiveness of all services in order to ensure the best care possible. Accountability fosters recovery.

Coordination

Comprehensive networks of providers within and outside of WSH cooperate to deliver an array of medical, psychological, self-help, social, supportive, and rehabilitative services that support recovery.

WSH Culture of Safety

In a culture of safety, people and organizations are not merely encouraged to work toward change, they take the action when it is needed. The hospital has aspired to increase its reliability and transparency by setting clear priorities and goals and developing measures and procedures that are tracked internally. This information is then shared with hospital staff and administration, various stakeholders and the public. WSH continues to demonstrate its strong commitment to safety by:

- Setting and communicating a clear, compelling vision of patient and staff safety at the hospital
- Valuing and empowering hospital personnel
- Engaging actively with staff, administration, and stakeholders in an effort to improve patient safety
- Focusing on specific, identified issues
- Continually searching for improvement opportunities

Creating a culture of safety does not happen overnight. The hospital has adopted these strategies and is transparent about the progress. WSH will continue to advance the culture of safety as it strives to improve the overall quality of care.

Western State Hospital – Safe Staff / Safe Patients / Better Quality of Care



"streetscene with crocodile"

Getting the Help You Need

How Treatment Can Help

Having a *mental health condition* means that a person shows signs of having problems with feelings, thoughts, and behaviors. A mental health condition becomes a *mental illness* when the symptoms affect one's ability to have a good life. These symptoms can be mild and brief, like adjustment to a new situation, or they can be serious and chronic, as in bipolar, schizophrenic, and anxiety disorders. This depends on the person, the severity of the mental illness, and level of community support. A mental illness can cause problems at work, home, and in the community.

Mental health treatment helps with symptom control and helps patients learn effective ways to cope with stress. Medication is the first way to treat symptoms. The second step is to learn how to manage anger, stress, and emotions while at WSH and after discharge. When medications and therapy groups are combined, a person is more likely to feel better faster and stay better longer. For this reason, it is important to continue to take prescribed medications and attend therapy groups.

What is Recovery?

Recovery is a process that includes times of growth and learning coupled with occasional setbacks. The first step is to understand that your symptoms are due to a mental illness. The next step is to better understand your mental illness. Your psychiatrist will order medication to help reduce your symptoms. Medications work quickly for most people with mental illness according to the National Alliance on Mental Illness. With time, almost all patients say they have fewer symptoms when on medication. A psychiatrist will work with you to find the most effective medications that can be administered at the lowest dose. Treatment teams help patients choose therapy groups that help reduce symptoms or address other problems, such as anger or negative leisure habits.

Keys to patient recovery include feeling hopeful, taking medication, going to treatment, using personal choice, finding support, learning about one's illness, and pursuing worthwhile activities, such as a job, according to information provided by the federal Substance Abuse and Mental Health Services Administration. Eating right, getting enough sleep, and exercising also help with recovery.

Treatment and Discharge Planning

You and your treatment team meet regularly to develop and practice a recovery plan. Team members have input regarding your plan, but you have the most important role on the team. It is your ideas, opinions, and likes and dislikes that guide the plan. Let your team know your ideas, problems, concerns, and goals. Ask questions. And attend treatment plan meetings – even on days when it's tough to get out of bed – so you can learn as much as possible about your illness and recovery.

Patients will receive a copy of their Treatment and Recovery Plan. This powerful tool will help you reach goals and plan the future you envision. It is meant to help with treatment, recovery and discharge back into the community. Read it carefully so you can ask questions or raise concerns at your Evaluation and Treatment Conference (ETC). The plan is an important way of making your stay at the hospital the most effective for recovery.

Your treatment team begins to plan your discharge when you first arrive. They will help you decide what's best for you when you return to the community. A successful discharge includes:

- Plans to manage your symptoms, compliance with your medication schedule, and ways to use healthy strategies to cope with problems
- Your skill to practice good hygiene and maintain a clean room and clothing
- Safe and affordable housing strategies
- Financial support from places such as Social Security and Public Assistance
- Follow-up mental health care
- A good support network and information about community resources
- Court approval, as required

The Treatment Team

Get to know your hospital treatment team members because they will assist with your recovery.

My psychiatrist:

- Talks with me about my diagnosis, symptoms, and medications
- Talks with me about my treatment and recovery

My psychiatrist is

My psychologist:

- Works with me to write treatment and behavior plans
- Talks with family member about their worries or concerns
- Helps me solve problems and create personal goals
- Manages any unit-based programs such as Social Learning Programs

My psychologist is

My social worker:

- Talks with me about putting my discharge plan into action
- Gives me information about housing, financial assistance, and other community information
- Helps me contact family and other loved ones

My ward social worker is

My nurses:

- Answer questions about my symptoms, treatment, medicines and any other health-related problems
- Listen and talk with me about my recovery, my diagnosis, and how to avoid relapse

My ward nurses are

Others are on your treatment team as well and each have particular skills and training. They include Institutional Counselors, Mental Health Technicians, and Psychiatric Security Aides. You can also meet with a pharmacist or a dietitian.

Other staff on my ward include:

The Treatment and Recovery Centers

Each unit within the hospital has a treatment “mall” or a recovery center, where classes are offered on a variety of topics. The classes are intended to assist you in your recovery process and to increase the skills needed to meet your individual goals. Some classes may focus on relapse prevention, symptom management, medication education, anger management, coping with depression, and vocational training. Staff can assist with planning plan your classes.

Recovery centers are a centralized approach to delivering services, where staff and patients come together to participate in services. Interventions are provided in the context of real-life functioning and in the rhythm of life of the patient. Services are based on patient needs and our goal is to have a well-rounded set of individual and group services that meet those varied needs.

Services are individualized to promote recovery, increase wellness and the patient’s ability to thrive in the world. Decisions regarding particular services are driven by the needs of the people served. Services are provided in a culturally sensitive environment and are strength-based. Services include individual interventions, group therapies, courses and activities designed to help manage symptoms, develop personal skills and enrich quality of life.

For patients with serious and persistent psychiatric disabilities, psycho-social rehabilitation programs include social competency training and emphasize choice and personal independence. Social learning and behavioral change through education and experiential activities give patients a better chance at success. Patients learn to assume responsibility for decisions that affect many aspects of their daily routines, allowing them to feel respected and valued. Patients engaged in recovery address past and present difficulties; personal, emotional or psychological injuries; and losses they have experienced in order to move forward in their life.

There is an increasing emphasis on physical wellness, exercise, diet and health promotion, because patients affected by mental illness often need to address physical health issues. Many of these programs use a psycho-education approach to promoting change. Smoking cessation, weight loss and general health education are widely promoted.

About Medications

Western State is a hospital for people with mental illnesses. Psychotropic medications are used to treat these conditions. Currently, the best treatment for mental illness is to combine medication with therapy and education. You also may be prescribed medications for a physical illness. The medications you receive are based on individual needs.

A psychotropic medication is one that will help improve your thoughts, emotions and behavior. They can help patients get rid of voices and visions (hallucinations), and fixed false beliefs (delusions) among other symptoms. Medication may be in the form of a capsule, tablet, liquid or injection.

Your psychiatrist will prescribe medications and some may cause unpleasant side effects. Some people never have side effects, while others may briefly experience them. A small number of patients may experience ongoing side effects. Tell your nurse and your doctor if you have these or new symptoms so that negative effects can be treated.

Written information about your medications is available from the nurse or doctor on your ward. Medication counseling can be provided by a pharmacist. Medication education classes are scheduled at the Treatment and Recovery Center. Here are some questions you can ask about your medication:

- What are the names of my medications?
- How will it help me?
- What is the dosage or strength?
- What are the possible side effects?
- What can I do about them?
- How often should I take the medication?
- How long must I take medication?
- Are there any special precautions?
- What happens if I don't take these medications?
- What over-the-counter medications or herbal remedies should I avoid?
- What happens if I can't afford the medication once I am discharged?
- What food, beverages, or activities should I avoid?

How long will you need to be medicated? Because many mental illnesses are chronic, like diabetes, you and your psychiatrist will discuss how long you will need the medications. Most likely, you will need to take the medication while you are at WSH as well as after you leave.

What will happen if you stop taking psychotropic medication? If you stop your medications, the symptoms will return in one to six weeks. A sudden stop in taking the medications could result in withdrawal symptoms. Always ask your psychiatrist or physician before stopping your medications. Talk with your pharmacist, physician or nurse to learn which foods and chemicals should not be used when taking medication.

May you or your family bring other medications into WSH? While you are here, the hospital will provide your medications. WSH does not allow anyone to bring in medications or supplements. If you bring medications when you come to WSH, the nurse will send them home with your family or guardian. If this is not possible, medications will be kept in the pharmacy for six months, after which they will be destroyed. Your attending psychiatrist must write an order so these medications can be released to you. All controlled substances are destroyed immediately.



Patients Rights and Responsibilities

Your Basic Rights

You have the right to:

1. Be housed and treated in a safe and secure environment.
2. Be free from all forms of abuse and harassment.
3. Be treated with dignity and respect, consistent with the principles of recovery.
4. Live in a humane environment that affords protection from harm.
5. Use the services of a signing or language interpreter, if needed, both to understand these rights and participate in the planning, care, and treatment provided for you. This includes periodic revisions to the treatment plan.
6. Have impartial access to treatment regardless of citizenship, race, religion, gender, sexual preference, ethnicity, age, handicap, color, or creed.
7. Be presumed competent (i.e., with full civil rights) regardless of your current or past admissions to a state mental hospital.
8. Dispose of property and sign contracts, unless a court proceeding directed to that particular issue has taken away those rights.
9. Have the hospital's rules and expectations explained to you in an understandable way.

Access to Professional Help

You have the right to:

1. Be told the names and professions of the members of your treatment team, other clinical staff, and their roles in your treatment plan.
2. Discuss with your treatment staff the reason(s) for any transfer (prior to that transfer) to another program or ward, or for a transfer to another hospital. You also have the right to know who will be in charge of your care and treatment.
3. Request the opinion of a consultant (mental health professional) at your expense. You may also request an in-house review of your treatment plan at no charge to you.
4. Talk to a priest, rabbi, minister, or religious counselor of your choice. To request this service, call the Chaplain's Office or ask a treatment staff member for help.
5. Contact your attorney, seek legal assistance, or call Consumer Affairs or the Director of Patient Grievance Investigations at any time.

Rights That Depend on Your Treatment Needs

Your treatment team may limit the following rights. If it does so, the reasons will be discussed with you and your appointed guardian and will be a part of your treatment plan. The clinically responsible staff will review the restrictions at least once every seven days. The reasons for your restrictions will be documented in your medical records. You are entitled to the rights listed below, as long as the exercise of these rights does not constitute a safety or security issue, create a danger to yourself or others, or interfere with your treatment. The Center for Forensic Services has additional safety and security requirements that may limit these rights further.

You have the right to:

1. Wear your own clothes and use your own possessions.
2. Keep and be allowed to spend a reasonable sum of your money.
3. Have your family and others (your caseworker, friends, etc.) visit you during regularly published visiting hours.
4. Have reasonable access to a telephone and to make and receive calls.
5. Send and receive mail free of staff examination. If staff, after reasonable consideration, suspects the contents are illegal or harmful to your treatment, you may have to open the mail in the presence of staff. No one can restrict the number of letters to and from your attorney or private physician.
6. Maintain privacy with regard to personal needs.
7. Have access to reasonable individual storage space for your private use.

Rights of Voluntary Patients

In addition to the preceding, you or your guardian should know that you have the right to immediate release, unless involuntary commitment proceedings are initiated or you have a jail hold.

Rights of Civilly Committed Patients**You have the right to:**

1. A court hearing within 72 hours of detention, excluding Saturdays, Sundays, and holidays, to determine whether probable cause exists to detain you for a further period of up to 14 days.
2. Communicate immediately with an attorney. If you cannot afford an attorney, you have the right to have an attorney appointed to represent you before and at such hearing.
3. Remain silent and be told that any statement you make may be used against you during involuntary commitment proceedings.
4. Present evidence and cross-examine witnesses who testify against you at the hearing.
5. Be given the option to refuse psychiatric medication, beginning 24 hours prior to any court hearing. Also, to the extent the law allows, you have the right to refuse medication at other times. If you do refuse medications, you will be told the medical and legal consequences and the medications will not be administered except as authorized by law. If there is a court hearing, an attorney will be appointed at no charge if you are indigent (without funds).
6. Apply for voluntary admission for treatment of a mental disorder. Your application may be refused, if not made in good faith.
7. Be free from all forms of abuse or harassment, including personal neglect.
8. Access information contained in your medical record within a reasonable time frame, except as authorized by law.
9. The assessment and management of physical pain.
10. Be informed about the outcomes of care so you, and/or your family, are able to participate in treatment decisions.

The Right to Choose

You have the right to:

1. Be free from restraint or seclusion in the hospital, except when necessary to prevent harm to yourself or others or when less restrictive interventions are not effective. You will be provided with a copy of the hospital's seclusion/restraint policy (WSH Policy 4.2.1) if you request it.
 - a. Seclusion/restraints, when used, will never be written as a standing physician's order or on an "as needed" basis.
 - b. A physician will meet with you as soon as possible if seclusion/restraint is ordered to ensure that there is no less restrictive alternative that can be used to keep you safe.
 - c. Seclusion/restraint will be discontinued at the earliest possible time.
 - d. Seclusion/restraint may not last over four hours unless you are assessed by a Licensed Independent Practitioner (LIP). If seclusion/restraint greater than 24 hours is necessary, you have the right to be seen face-to-face by a medical doctor, who will assess to see if you are appropriate for release or continued seclusion/restraint.
2. Refuse any surgery, except for emergency life-saving procedures.
3. Prepare an advance health care directive if you so choose.

You have the right to refuse psychiatric medications unless ordered by the court. **However, remember that just because it is your right does not mean it is in your best interest to refuse prescribed treatment.**

Treatment Rights

You have the right to:

1. Receive individualized, appropriate care and treatment from qualified and experienced professional clinical staff, regardless of the source of your financial support. You also have the right to request a second professional opinion at your expense.
2. Treatment plans supportive of your personal liberty within the limits of the law.
3. An individualized treatment plan with scheduled reviews, appropriate revisions, and a description of services needed after discharge.
4. Be provided with a clear explanation of your treatment plan, including:
 - a. Your general mental and physical condition.
 - b. Knowing your treatment objectives.
 - c. The nature of recommended treatments and significant adverse (unpleasant) effects, if any.
 - d. The reasons why particular treatments are considered appropriate, as well as their risk(s) and benefits.
 - e. Any appropriate and available alternative treatments, services, and types of providers of mental health services.
5. Have any treatment order restricting you to bed rest reviewed every three days by your physician.
6. Request medically justified treatment and/or refuse treatment that is not medically justified.

Compensation for Employment

You have the right to be paid for work you do as part of vocational services. Work done will be in keeping with appropriate state and federal laws and regulations.

The Right to Privacy

You have the right to:

1. Be protected from the invasion of privacy. You also have the right to have all your records kept confidential (private) and released to you or someone else with your consent (or that of your guardian, if any), except as permitted by state and federal law.
2. Know what use will be made of films, videos, photographs and tape recordings of you if these are used in your treatment. Pictures and/or recordings cannot be made without your permission, except for an admission photograph, which may be updated periodically.
3. Refuse to take part in a research project without affecting your regular treatment in the hospital. You have the right to participate in research with your permission (voluntary informed consent). You have the right and opportunity to withdraw such consent at any time. This does not include data collected for treatment, utilization review, or quality improvement purposes.

Your responsibilities:

1. Abide by the rules and regulations of this facility.
2. Respect the rights and property of patients, and staff. Do not damage or destroy hospital property.
3. Participate in your treatment planning and in your treatment program.
4. Take care of your physical needs, (grooming, bathing, and dressing) insofar as you are physically and psychologically able.
5. Tend to normal housekeeping chores in your living area, such as making your bed, caring for your clothing, and keeping your community area clean and neat.
6. Protect and care for your personal property.
7. Pay your bills on time within your ability to do so.
8. Familiarize yourself with your rights.
9. Follow hospital policy by not smoking on wards, smoking only in designated areas on hospital grounds, and by remaining 25 feet from building entrances and air intakes.
10. Take pride in the hospital campus by using the specific trash cans designated for cigarette butts and all other trash cans for other trash.

Medication Rights

You have the following rights:

1. If your doctor wants you take medication, he or she must first tell you the name of the medication, its purposes, its intended benefits and its possible side effects.
2. You have a right to talk to another doctor about your need for medication.
3. Your doctor may propose a medication for you only as part of your individualized treatment plan.

4. You, and if you wish, your family, have a right to take part in any proposal to give you medication.
5. If you are a voluntary patient and continue to refuse medication, either you will be discharged or a mental health professional will be summoned to begin the involuntary commitment process.

The Right to Express Yourself and Be Heard

You have the right to:

1. Have access to attorneys, courts, and legal redress (assistance). This includes reasonable contact with attorneys by telephone.
2. Request release, and if your request is denied, to have access to attorneys, courts, and other legal assistance.

Patient Complaints

You and your family members may also contact a Western State Hospital Patient Advocate at (253) 756-2689 or the Director of Patient Grievance Investigations at (253) 756-2669 regarding any concerns or complaints. If you believe you've been treated unfairly, you are encouraged to file a complaint. To do so, you may:

- Seek out a member of your treatment team to discuss your concerns.
- Fill out a "Patient Complaint Form" or write a letter of complaint to the Director of Patient Grievance Investigations and place in the complaint box on your ward or at a Treatment and Recovery Center. Someone may be assigned to meet with you to discuss your concerns.
- Report any abuse or neglect to the Abuse/Neglect Hotline (253) 761-7599. You are not required to leave your name, but you do want to leave enough information about your complaint. You can also call WSH Consumer Affairs at (253) 756-7533 or the Director of Patient Grievance Investigations at (253) 756-2669.

The Right to Make Complaints and File Grievances

You have the right to:

1. Exercise all your rights without reprisal (negative consequences), including the right to file complaints.
2. Submit complaints and grievances addressed in a timely manner without being subject to retaliation or interruption of your care. (A full description of the hospital's complaint/grievance resolution is found in WSH Policy 4.1.2. and is available upon request.) To set the process in motion:
 - a. Seek out a member of your treatment team to discuss your concerns.
 - b. Fill out a complaint form called the "Alleged Violation of Patient Rights" (PRV) or write a letter of complaint to the Director of Patient Grievance Investigations and place it in the locked complaint box on your ward. Complaint forms are available at all nursing stations. A designated staff member will review your grievance and forward it to the appropriate supervisor for investigation and follow up.
 - c. If your grievance/PRV cannot be resolved in seven days, you will receive a letter that contains the name of the hospital contact person, the steps taken to investigate and address your grievance, results of the grievance process, and the date of completion.

- d. The hospital's Governing Body ensures that there is a process for the effective oversight of the grievance process. This body must approve and is responsible for the effective operation of the grievance process and must resolve grievances unless it delegates the responsibility in writing to a grievance committee.
3. Receive timely referral and feedback if you have any concerns about the quality of your care, including the discharge process.
4. Report any abuse or neglect concerns to the Abuse/Neglect Hotline at (253) 761-7599. You are not required to leave your name, but you do want to leave enough information for a thorough investigation to be conducted. You also may call WSH Consumer Affairs at (253) 756-7533 or the Director of Patient Grievance Investigations at (253) 756-2669.
5. Report concerns/complaints to The Joint Commission or other accreditation bodies.

Confidentiality

You are guaranteed the right to privacy and confidentiality. You will have as much privacy as possible when talking with a visitor, treatment team member, or therapist while at Western State Hospital. Staff members are prohibited from disclosing any type of patient information, unless a signed release of information is provided by the patient. Computerized information is never shared with other organizations; thus, individual patient names are not identified. For additional information, refer to the section titled Patient Privacy and the Release of Information on page 42.

Patient Health Care Decisions

During your hospital stay, you, or those designated by you, may have to make decisions about your medical treatment. We want to respect your decisions concerning the health care treatments you wish to receive or decline. It is important that you are informed of the treatment choices available to you, so you and your designated guardian can make informed decisions about how these treatments or therapies should be used.

In accordance with state and federal law, it is your right to make an advance health care decision and prepare advance health care directives. Advance health care directives are documents such as a Living Will, a Durable Power of Attorney for Health Care, a Do Not Resuscitate (DNR) Order, and Anatomical Gifts (organ/tissue donation). These documents are prepared by you and help you or your designee make health care decisions consistent with your wishes. This may happen in the event that you become incapacitated and cannot let your wishes be known. If you have not prepared an advance health care directive and you would like more information or would like to prepare one, you may request more information from staff. Forms are available through Legal Services at WSH.

Life Support Systems

Medical science can improve our quality of life, helping us to live longer and healthier lives. Often, critically ill or injured people can be restored to health.

However, there are times when life-saving medical treatment maintains a state of life unacceptable to the patient and only extends the dying process. Please discuss such treatments with your doctor and your family or designated guardian. Let them know your choices about your medical treatments if you are diagnosed as terminally ill and if the treatments will only prolong death. Care and comfort will always be provided to you and your loved ones.

Living Will and Power of Attorney

Two documents can help you plan ahead and indicate your wishes concerning your future medical care:

1. A Living Will is a document that states what medical treatment you want or do not want in the event you are diagnosed as terminally ill and treatment would only prolong the dying process.
2. The Durable Power of Attorney for Health Care is a document that appoints a person such as a relative or friend to make your health care decisions when you are unable to do so. It discusses what treatments you want and what treatments you do not want. Patients who want additional information may ask ward staff for a copy of “Health Care Powers of Attorney.”

Patients who desire to speak to an attorney regarding either the Living Will or Durable Power of Attorney for Health Care may call the Northwest Justice Project offices at (866) 280-4095.

Cardiopulmonary Resuscitation (CPR)

If you stop breathing or your heart should stop beating, designated personnel will immediately begin emergency procedures. However, for some people who are extremely ill, these emergency procedures might only result in prolonged suffering. In such situations, it is appropriate for patients or designees to request no further resuscitation or life-support therapies. Please discuss this in full with your doctor and your designee before arriving at a decision concerning CPR.

If you decide that you do not want CPR, your doctor will write a specific order in your chart. You will be provided with the utmost care and comfort. The staff will be available to your loved ones to offer them support and comfort. Should your medical condition improve, you or those temporarily making decisions for you can change this order.

Organ Donation

Many people become organ donors. They realize that after they die, they can give the gift of life or sight to others. Organ donors know that immediately after they die, a surgeon will remove the organs they have indicated for donation (kidneys, heart, lung, skin other organs and tissues). You may also donate your body for research purposes. If you do not wish to donate, you should let your family know. Otherwise, they have the authority to donate your organs after you die.

If you decide to become an organ donor, the hospital can provide you with a form to indicate your decision. Please speak with a member of your treatment team about this. If you are currently an organ donor, please advise your doctor. You may ask a member of the treatment team for more information about organ donation or you may call Life Center Northwest, an organ procurement agency, at (877) 275-5269 or (425) 201-6563.

Voting

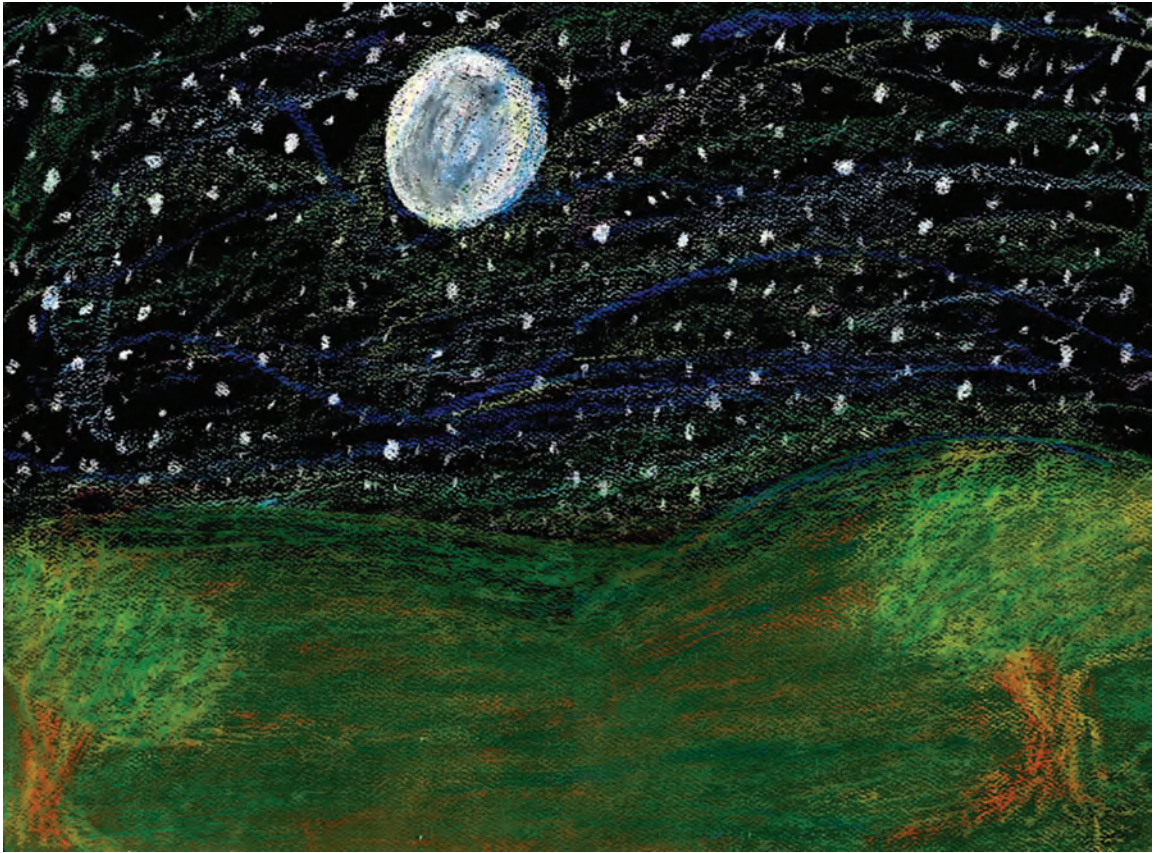
Patients who are not disqualified from voting due to a court order and who are not under the authority of the Department of Corrections (DOC) for a felony conviction can vote. Forms to register may be obtained from the hospital mail room, the Patient Library, or Western State Hospital Consumer Affairs/Volunteer Services. Voting can be done by absentee ballot in advance of any election. Ask ward staff to assist you in obtaining a ballot.

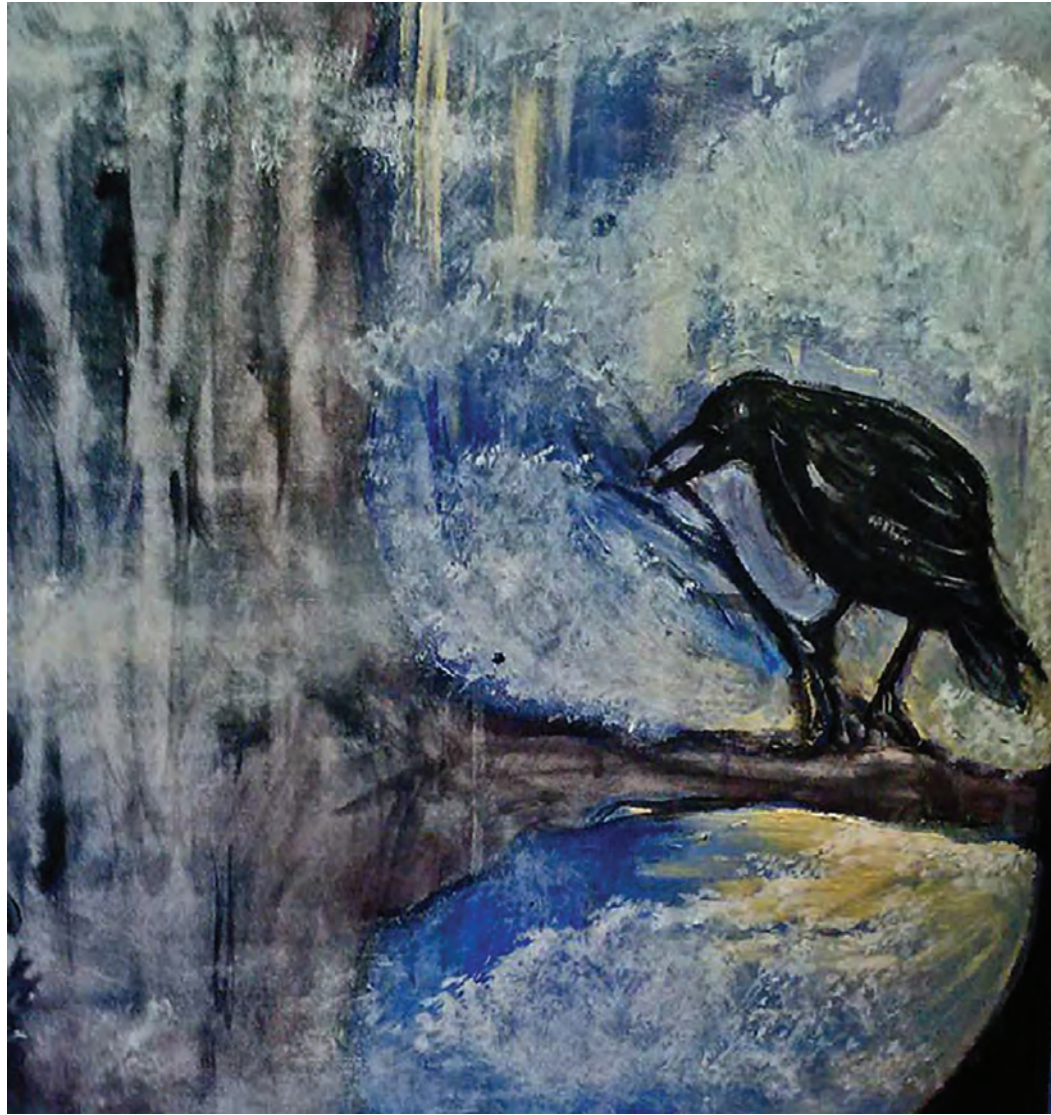
Use of Tobacco and Vaping

State law prohibits smoking within 25 feet of entrances, exits, windows that open, and ventilation intakes that serve enclosed areas in all public buildings. Smoking and tobacco use are not allowed inside state buildings, including Western State Hospital. Hospital policy also limits the use of electronic vaporizing devices regardless of content of tobacco or nicotine.

Western State Hospital is committed to providing tobacco cessation programs under the direction of a patient's treating physician and to ensuring treatment programs support these efforts. It is quite possible that the Hospital someday will become a tobacco-free facility.

Please refer to the Center for Forensic Services Manual for information about smoking rights for CFS patients. CFS is a tobacco-free facility.





Patient Funds

Personal Funds

Western State Hospital Policy 4.1.1 refers to the funds kept by patients as a “reasonable” amount of money for their own purchases. Western State Hospital Policy 1.7.7 allows the patient upon admission to keep up to \$25. The treatment team makes the determination as to what amount will be “reasonable” based on its evaluation of the patient.

In addition to the limitation of \$25 upon admission, the hospital places other limitations on fund withdrawals:

1. Weekly withdrawals are set at no more than \$15 a week.
2. Patients who earn wages governed by the Fair Labor Standards Act can draw an additional amount up to the weekly draw limit of \$15.
3. The accounting office, when permitted by law, will make deductions from the patient’s account for cost of care, based on a person’s ability to pay.

Exceptions to withdrawal of funds limitations are:

1. The Superintendent may authorize the expenditure of patient funds for personal needs in excess of what has been described above.
2. At the request of the patient, a treatment team member may prepare a fund withdrawal request for approval by the Clinical Director or a designee.
3. The Medical Director, at the patient’s written request, shall review any request for withdrawal of personal funds by the patient not approved by the designated treatment staff or treatment team.

Exceptional Personal Needs

Exceptional personal needs may include:

1. Other personal medical or dental care, to include medical equipment such as a wheelchair;
2. Shelter and living expenses;
3. Payment of outstanding debts;
4. Expenses for educational, rehabilitation or recreational supplies not furnished by the hospital;
5. Expenditures that would strengthen the patient’s community support system;
6. Reimbursement to the hospital for damages to hospital property;
7. Other expenses not recommended by the treatment team.

Exceptions: Candy, pop and snack items are items that normally do not fall in the “exceptional” category.

Policy on Personal Funds

The hospital and its staff cannot:

1. Seize a patient’s Social Security money for cost of care unless you or your representative payee volunteer to pay it.

2. Consider Social Security funds when this agency decides whether a patient owes any money for the cost of care. This means that if a patient has only Social Security money, he or she does not owe any money to the state for the cost of care.
3. Seize other kinds of money from a patient's accounts at Western State Hospital without going to court. The state cannot take your Social Security money unless you give the state written permission to take it.
4. The hospital and hospital staff shall not:
 - a. Threaten, coerce, or intimidate patients or their representative payees, to pay Social Security money to the state for cost of care.
 - b. Threaten to discharge a patient or keep a patient longer at the hospital, if the patient does not pay for the cost of hospital care.
 - c. Encourage or induce patients to deposit their money in the hospital patient accounts or any other place where the money would be easier for the state to collect it. However, staff may inform patients that they can deposit their money with the hospital's accounting office. Staff may require patients to deposit their money there if there are no other deposit arrangements. Patients shall be allowed to withdraw all or some of their money from the hospital account and place it in an account outside the hospital.

Notice to Patients Who Receive Social Security Funds

The Department of Social and Health Services is prohibited from seizing Social Security funds to collect or recover the cost of care at the state hospital. DSHS must follow these rules:

1. DSHS may not seize your Social Security funds to pay for the cost of your care at the state hospital.
2. DSHS may include your Social Security funds when calculating the amount of your ability to pay for the cost of care at the state hospital. DSHS will notify you what that amount is through the Notice of Finding of Responsibility process. You may appeal the amount owed if you do not agree with DSHS' calculation.
3. DSHS may ask you or your representative payee, if it is not DSHS, to voluntarily use your Social Security funds to pay what DSHS has calculated you are able to pay. However, DSHS may not threaten, coerce, or intimidate you or your representative payee, in any way, to use your Social Security funds to pay for the cost of your care. Any payments you make out of your Social Security funds must be voluntary and you may stop them at any time.
4. DSHS will not accept any of your Social Security funds as payment, unless you or your representative payee signs an agreement to make voluntary payments. If you stop making payments, DSHS may still send you a notice showing the amount you owe.
5. If you do not or your representative payee does not agree to pay for the cost of hospital care using Social Security benefits, DSHS may not discharge you from the hospital earlier than necessary or keep you in the hospital longer than is required.
6. While you are a patient in the hospital, the Social Security Administration expects you or your representative payee to pay for the cost of care, as well as for items which may aid you in your recovery or release from the hospital or for personal items which may help improve your condition while in the hospital. DSHS may not report you or your representative payee to the Social Security Administration solely because you do not use your funds to pay the cost of care. However, if DSHS reasonably suspects that Social Security funds are being used contrary to federal law, DSHS may notify the Social Security Administration.

7. You do not have to deposit your Social Security funds in the hospital accounting office. However, the state hospital may require you to deposit your money in the hospital accounting office if you do not arrange for deposit elsewhere. You may withdraw your money from the hospital accounting office and place the money in an account outside the hospital, unless DSHS is your representative payee.

If you have questions about your individual rights under this settlement, you may contact your private attorney or:

Patient Legal Services – Western State Hospital

WSH Building 25, Room #103
9601 Steilacoom Blvd S.W.
Tacoma, WA 98498-7213
Phone: (253) 756-2674

If you think DSHS is breaking these rules, you may contact *Brinkman* class counsel:

Columbia Legal Services

101 Yesler Way, Suite 300
Seattle, WA 98104
Phone: (800) 542-0794, Ext. 100

If you have questions or concerns about Social Security benefits, you can call the Patient Financial Services Department:

- (253) 756-2614
- (253) 756-2791
- (253) 756-2602

WSH Cost of Care and Handling of Personal Funds

The Office of Financial Recovery in Olympia is responsible for billing the cost of care at WSH. By law, voluntary as well as committed patients are responsible for their hospitalization costs.

If it is determined that you may be able to pay for your care, OFR will mail you or your designated payee, a Financial Questionnaire. It is very important that this form be completed because your hospitalization costs may be adjusted depending on your ability to pay. OFR will determine whether you have to pay any part of your bill. They will send you an official notice stating your daily or monthly financial responsibility toward the cost of your care.

OFR will bill Medicare, Medicaid, and private insurance whenever possible. Medicaid will only pay for eligible patients who are under 21 or over 65 years of age. Medicare will pay for 190 days of inpatient psychiatric care in a lifetime. However, only 90 days can be billed per benefit period.

For additional information regarding your hospitalization costs, you may contact the Office of Financial Recovery at (800) 562-6114 or the Field Office located at the hospital at (253) 756-2763.

If you have questions or issues with Medicare benefits, call (253) 756-2554.



Legal Assistance

Northwest Justice Project

Western State Hospital has a contract with the Northwest Justice Project (NJP) to provide legal services to hospital patients. NJP is a non-profit agency that provides free civil legal services to low-income people. NJP lawyers do not work for the hospital. NJP lawyers are on the hospital grounds to advise and assist patients with non-criminal legal problems.

NJP Office Hours at Western State Hospital:

Tuesdays and Fridays, 9:00 a.m. to 4:30 p.m., WSH Building 25

For further information call:

(253) 756-2965

(866) 280-4095 (toll-free)

(253) 272-8226 (fax)

Or send your request, postage free, to:

NJP Patient Legal Services at Western State Hospital

9601 Steilacoom Blvd. SW, Mail Stop 25

Tacoma, WA 98498-7213

Additional Resources:

NJP's Coordinated Legal Education Advice and Referral service (CLEAR)

(888) 201-1014 or (888) 201-9737 (TTY)



Hospital Services

Art Center

The Art Center is an open art studio where patients participate in group and self-directed arts activities. Patients may explore a variety of instructor-led opportunities. Instructors provide reflective techniques and technical instruction. Journaling, goal-setting, self-esteem inventories, art assignments, group activities and self-directed art exploration provide patients with a greater understanding of their own ability to control their future, monitor mood and self-esteem, and participate in art projects. These help reduce anxiety and redirect negative energy into positive self-expression through art.

Beauty Shop

Haircuts, perms and shampoo/sets are provided free to patients by the Beauty Shop. Haircuts are provided on your ward or the treatment mall. Ward staff can provide the hours that services will be available on each ward. To make an appointment, call Ext. 2816.

Consumer Affairs

In partnership with patients and staff, The Office of Consumer Affairs works to promote dignity, respect, acceptance, integration, and choice for people receiving services from the hospital and to reflect a recovery-oriented environment.

Patient Connections: Town Hall meetings are held on the treatment malls so patients can share information and to identify areas for improvement to be shared with hospital leadership. Upon request, the Consumer Affairs Director attends treatment team meetings to provide support and work toward resolving concerns. The director visits groups and may bring peer-support volunteers from the community.

Family Outreach: The director helps connect family members with social workers, other team members and local support groups, such as National Alliance on Mental Illness (NAMI). The director may attend Family Meetings with treatment team members upon request. The office also supports Family Education activities.

Providing Voice: The director serves on the WSH Policy and Patient Care Committees and shares patient and family perspectives and concerns, contributes to special projects, and represents the hospital at community events and meetings.

The telephone number for the Office of Consumer Affairs is (253) 761-7533.

Diabetes Care Team

The Diabetes Care Team includes highly trained pharmaceutical, medical, nutrition and nursing staff, all of whom collaboratively educate patients diagnosed with diabetes and pre-diabetes. Patients pending discharge are personally trained and provided with a glucose meter and supplies to last at least two weeks following discharge from WSH. Education coaching includes integration of pharmaceutical, medical, education, and direct patient care activities that meet patients' individual diabetes care needs. Patients receive instructions on self-monitoring blood glucose, self-injecting insulin, recognizing and treating signs and symptoms of low blood glucose, management of high glucose by healthy eating, being active, monitoring blood glucose, and taking medications.

WSH has a Certified Diabetes Educator Pharmacist who personally reviews glucose and laboratory values and assists physicians with adjusting therapy for patients with diabetes and pre-diabetes.

Contact the Diabetes Care Team at Ext. 3392.

Fashion Center

Patients can visit the Fashion Center for free clothing. Questions can be answered by Fashion Center staff at Ext. 3940. Ward staff can provide assistance for patients unable to walk to the Center.

Health and Hygiene

Personal hygiene items, including (toothpaste, shampoo, deodorant and other items) are available from nursing staff on the wards.

Infinity Center

The Infinity Center is a multipurpose recreation and meeting center, where patients can relax and recreate away from the wards. Patients can play pool, foosball, air hockey, shuffle board and musical instruments, and watch programs on a large screen TV. Vending machines and snacks are available in the lounge area. Holiday parties and social events are held throughout the year.

Java Site

The JAVA SITE is a Western State Hospital community-based coffee shop that is within SITE Industries (Seeking Independence Through Employment) where staff and patients work together to improve life skills. Patients and staff can interact and practice positive social and communication skills. Patients working in the JAVA SITE learn skills in the service industry that will prepare them for employment after discharge from the hospital. Items are available at very reasonable prices. The SITE is open Monday through Friday, 8:45 a.m. to 11:00 a.m. and 1:00 p.m. to 2:30 p.m.

Library

The Library is located on the second floor of Building 8 and is open Monday through Friday, 8:30 a.m. to noon and 1:00 p.m. to 4:00 p.m. Books, magazines, music CDs, movies, Internet access (with staff supervision) and printers and a music listening center are provided. Information queries are welcome.

The WSH Library is a branch of the Washington State Library. Patients and staff may request that materials and information be sent to units or offices by calling Ext. 2593.

Mail and Postal Services

Patients have access to writing materials and free postage for three letters a week to send uncensored correspondence through the mail unless limited by the treatment plan or doctor's order. A patient's right to send or receive mail may be partially and temporarily limited if doing so would clearly present a danger to the patient, to any other person, or presents a threat or harassment to others. Free postage is not available for ordering materials, supplies, equipment, catalogs, samples, entering contests or similar categories.

Proper return address, including zip code, is required on all mail. Example:

Your Name
9601 Steilacoom Blvd. SW
Ward _____
Tacoma, WA 98498-7213

Your staff person can answer questions about mail. Please refer to the CFS Manual for information about mail rights for patients in CFS.

Narcotics Anonymous and Alcoholics Anonymous

NA and AA meetings are offered in the evening. Contact your ward staff for information.

Patient and Family Education Services

Patient and Family Education is a contracted service through Pierce College. Instructors are Washington state licensed and certified teachers. Referred students work in classrooms on computer skills, English as a second language, GED preparation and testing, and adult basic education. Each student has individualized learning and behavioral goals that are part of their treatment plan.

Classes focus on functional skills such as reading and comprehending information related to one's illness and treatment, networking and applying for a job, and improving typing, communication, math and writing skills. Additionally, classes provide students a sense of pride by allowing them the structure, resources, and support to create and achieve tangible learning goals. Education is a cornerstone to the most vital tenet of recovery: living a full, satisfying life.

Personal Food Storage

Visitors are allowed to bring in food to enjoy a meal with the patient in a private space on the ward, unless prohibited in the patient's care plan. WSH does not have the ability to store prepared foods, so the food brought in while visiting must be limited to what can be consumed during the visit. If clinically contraindicated for a patient, visitors will be asked to avoid providing the patient with high sugar-content items, caffeinated drinks, or other food inconsistent with the patient's well-being. Snacks should be healthy. Food may not be kept in patient bedrooms.

Physical Health, Nutrition, and Wellness

Part of patient recovery is to become as healthy as possible. This includes good nutrition, weight management, regular exercise, smoking cessation and other lifestyle considerations. If you are nutritionally compromised, such as overweight or underweight, your treatment team will discuss its concerns with you. It also will recommend a dietary or nutrition consult with our in-house Registered Dietitians and set up nutritional options and resources that are in your best interest

and include medical nutrition therapy, personalized nutrition education, religious and cultural based-diets and weight tracking.

WSH vending is also centered on wellness and provides healthy options. Staff in the Recovery Malls (TRC in CFS) will provide guidance in selecting healthy options.

Exercise classes are available upon request. Patients are encouraged to walk the wards and take the stairs as often as possible for additional exercise. Talk to your treatment team about access to other physical fitness opportunities on campus.

Written information on health and wellness topics are available from Registered Dietitians or Patient and Family Education.

Religious Services

The Chaplaincy Department at Western State Hospital provides spiritual care for patients, their families and staff. It works as a team to provide pastoral care and support, providing Catholic and Interfaith/Protestant services throughout the hospital, while ministering to those from all faiths, cultures, and backgrounds. Ask a ward staff member for a schedule of services or call (253) 756-2645.

Storage of Personal Possessions

Ward staff take inventory of all items accompanying a patient at the time of admission using the Personal Possessions Form (WSH 26-07). The original form is filed in the ward chart and a copy is given to the patient or guardian.

At the time of discharge, any property that is retrieved from Accounting, Ward Storage, Security, or Inventory Control, is accounted for as:

- Returned to the patient
- Returned to the patient's guardian
- Disposed — permission given by the patient or guardian to dispose of any unwanted property

The patient or guardian is notified that property not retrieved or removed from WSH within 90 days will be considered abandoned and lawfully disposed of or donated.

Western State Hospital is staffed to provide for the care of our patients. It is not staffed to secure, safeguard or otherwise guarantee the security and continuous accountability of patient property. Family members or guardians are asked to secure and retain property that is valuable or most important to the patient. The hospital will store up to three boxes (16x16x16) per patient.

Vocational Rehabilitation

Patients interested in working as part of their recovery while at Western State Hospital should talk to their treatment team. Possible job locations include the Greenhouse, Laundry, Art Center, Volunteer Services, Mailroom and Kitchen. These are paid positions that require approval from your treatment team.

Rehabilitative Services Staff

Rehabilitative Services staff at Western State Hospital consist of Recreation Therapists, Occupational Therapists, Certified Occupational Therapy Assistants, Recreation and Athletic Specialists, Certified Teachers, Institutional Counselors, and Psychology Associates. These staff work closely with you to achieve recovery by assisting you with your treatment goals and helping you gain skills and knowledge needed for a successful placement in the community. Rehabilitative services staff offers a wide variety of active treatment groups, geared toward your identified needs and may include health and wellness, medication education, stress management, coping skills, emotional awareness, leisure skill groups, vocational groups, leisure education, and living skills groups. You will work with Rehabilitative Services staff to choose your groups in conjunction with support and assistance from your treatment team.



Civil Commitment

The Court System and the Civil Commitment Process

Patients who are civilly committed to Western State Hospital go through a standard procedure. Most civilly committed patients come directly from the community and some are civilly committed after completing competency evaluations or restoration in the Center for Forensic Services and their criminal charges have been dismissed.

Patients Committed from the Community

A Community Mental Health Professional (CMHP) petitions the court to send a person to a state psychiatric hospital for treatment and then a court hearing is held. During the hearing, the CMHP tells the judge why the person needs treatment at the hospital. Based on testimony and civil commitment conditions, the judge determines whether the person meets the commitment criteria. The judge usually commits the person for up to 90 days of treatment.

Once at WSH, the patient's treatment team can decide whether further treatment is needed after 90 days. The ward psychologist interviews the patient and writes the court petition. After that, a court hearing will be held at WSH and the psychologist will give information about the patient's progress. After hearing all the information, the judge will make a ruling. Usually, commitments after the initial 90 days are for up to 180 days of treatment. However, if a judge rules for 180 days of treatment, this does not mean that the patient will be at the hospital for that long. Patients can be discharged at any time if their treatment team believes services have been successful.

Patients can be found by a judge to meet civil commitment criteria for several reasons. The most common is Grave Disability, which means that the person cannot take care of his or her own health or safety needs in the community due to their mental illness. Sometimes, this is because a person stopped taking medications, broke the law or experienced such severe mental health symptoms that he or she is not able to take care of themselves. Individuals may also be civilly committed if they have tried to hurt themselves or someone else.

Patients Committed from the Center for Forensic Services

Individuals who have completed a competency evaluation or competency restoration in CFS and have been found not competent are often civilly committed after their criminal charges have been dismissed.

A court petition is filed by a WSH psychologist that describes why the individual requires treatment. Then, a court hearing is held during which the psychologist testifies about why the patient requires treatment at the hospital, and the judge makes a ruling based on the testimony. Sometimes during these hearings, the judge will also hear evidence about the crime the individual is said to have committed. If the judge finds that the person meets legal civil commitment criteria, then the patient is committed for either 90 or 180 days. The person's treatment team can then decide if the patient requires additional treatment after the initial commitment period is over. If the person requires more treatment, the ward psychologist will interview the patient and write the court petition. Then, a court hearing will be held at the hospital during which the psychologist will testify and the judge will make a ruling. Usually,

these commitments are for 180 days of treatment, although this does not mean that the patient will be at the hospital for that long. Patients may be discharged at any time if their treatment team believes services have been successful.

Patients who have completed competency evaluations or restoration services in CFS and whose charges have been dismissed can be found by a judge to meet legal civil commitment criteria for several reasons. The first is Grave Disability, which means that the person is unable to provide for his or her own health and safety needs in the community. Individuals may also meet legal civil commitment criteria if they have tried to hurt themselves or someone else. The last civil commitment criterion is based on a person's index offense, or the crime that led them to be committed for competency evaluation and restoration. If this crime is a felony, a patient can be civilly committed if the judge finds that he or she did commit the crime and may commit similar crimes due to their mental illness. Additionally, if the crime the person committed was a violent crime (a crime that involved physically hurting another person), he or she may have added legal requirements to meet in order to be discharged from the hospital.

An Overview of the Psychiatric Treatment and Recovery Centers (PTRC)

PTRCs are located on the East, South, and Central Campuses. The recovery centers are a centralized approach to delivering services, where patients and staff come together to participate in services. Services are individualized to promote recovery, increase wellness and the patient's ability to thrive in the world. Decisions regarding particular services are driven by the needs of the people served. Services are provided in a culturally sensitive environment and are strength-based. Services include individual interventions, group therapies, courses and activities designed to help manage symptoms, develop personal skills and enrich quality of life.

For individuals with serious and persistent psychiatric symptoms, groups use recovery-based interventions in order to reach patients' goals. Social learning and behavioral change through education and experiential activities assist individuals to become more likely to succeed in their next phase of life. The focus is on normalizing roles and relationships, which can include preparing for and finding work or other related productive activities. Individuals learn to use healthy decision making in their lives, with the goal of feeling respected and valued. Individuals engaged in recovery can explore a number of challenges, including past and present difficulties, losses and how to live with residual symptoms of their mental illness.

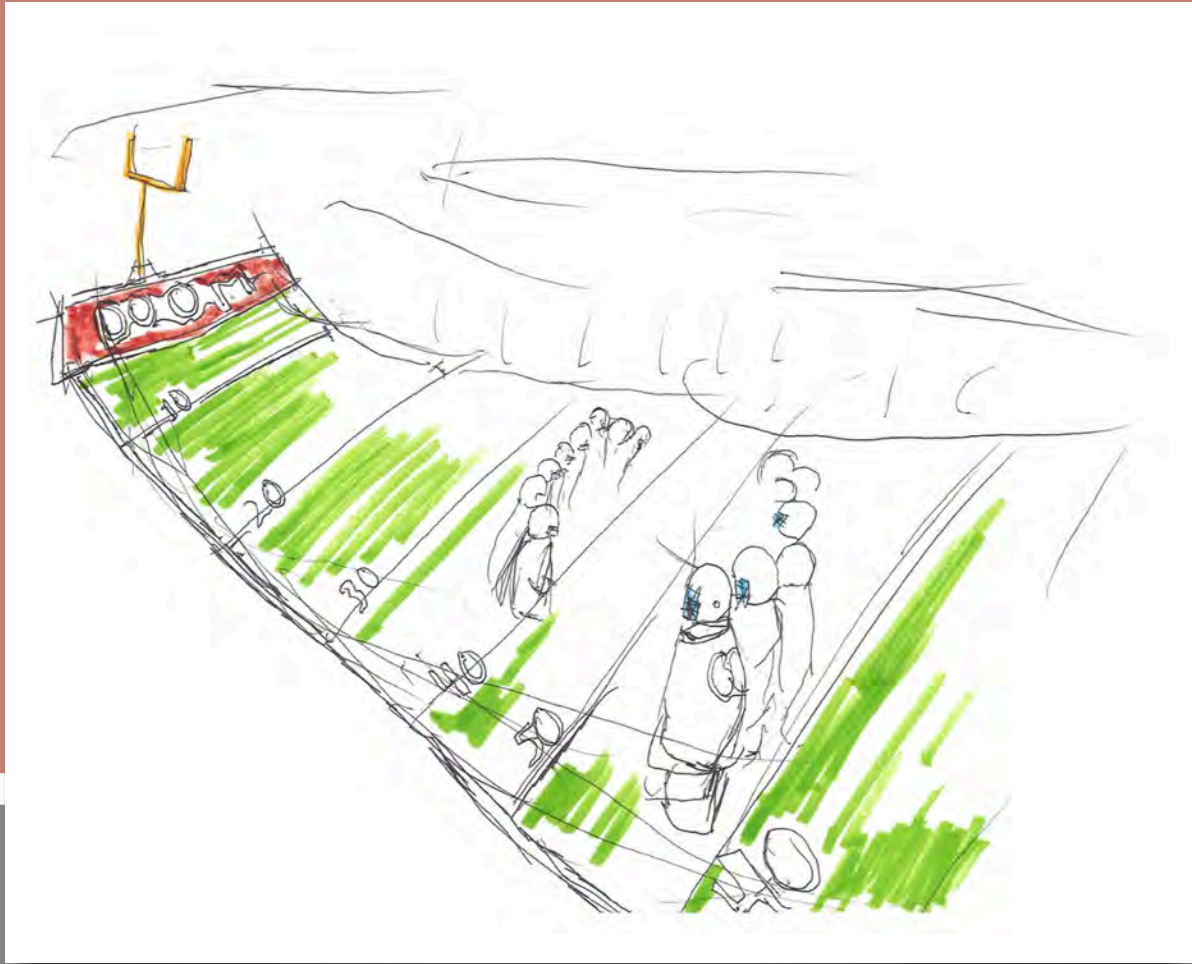
There is an increasing emphasis on physical wellness, exercise, diet, and health promotion, because patients affected by mental illness often need to address physical health issues. Many of these programs use a psycho-education approach to promoting change. Smoking cessation, weight loss, and general health education are now more widely promoted.

East Campus Program Introduction

The programs at East Campus, also known as PTRC East, are designed for patients who are 55 years or older and for males who need treatment that specializes in traumatic brain injury or psycho-social rehabilitation.

East Campus patients, staff and clinicians work together to determine class activities, schedules, and treatment models, such as hands-on projects or discussion sessions. Classes include arts and crafts, exercise, dealing with depression, GED and general education, computer skills, achieving personal goals, discharge planning and preparation, medication education, and coping skills.





Forensics

The Court System and the Forensic Process

Competency Evaluation and Restoration

It is legally necessary that criminal defendants understand court proceedings and are able to assist in their own defense. If they are unable to do so, they may be found incompetent to stand trial and then ordered to receive mental health treatment to restore competency at the hospital's Center for Forensic Services. A forensic evaluator assesses each defendant and prepares a report on the defendant's ability to stand trial.

Not Guilty By Reason of Insanity

Someone charged with a crime and found to have committed the crime, but at the time did not understand the wrongfulness of the act and was mentally ill, can plead Not Guilty by Reason of Insanity (NGRI). If a person in Washington is found NGRI, he or she is likely to be admitted to the forensic centers at Western or Eastern State Hospital.

The treatment for a person admitted as NGRI usually includes psychotropic medication, psycho-social groups, and individual therapy that targets issues related to their risk of reoffending.

An Overview of the Center for Forensic Services (CFS)

The CFS Treatment and Recovery Center is divided into two major program areas, Competency Restoration and NGRI Rehabilitation services.

Competency Restoration services provide a variety of group courses that target specific barriers to competency that are determined the Intake Psychological Assessment. These include C.O.R.E. classes: Courtroom Knowledge and Understanding, Optimal Symptom Management, Relaxation and Coping Skills and Effective Communication in the Court System.

Patients are assigned to C.O.R.E. groups based on symptoms and level of functioning. Patients can be referred to groups to learn skills in problem-solving, interpersonal effectiveness and medication education.

The Not Guilty by Reason of Insanity (NGRI) program offers classes geared toward reducing risk of wrongful behaviors by addressing antisocial behavior and thinking, interpersonal effectiveness, work and vocation skills, leisure and substance abuse.



Habilitative Mental Health

Program Introduction

The Habilitative Mental Health Treatment Program (HMH) serves up to 30 clients with developmental or intellectual disabilities who present with challenging behaviors and mental health needs. Most of these patients are civilly committed because they have been found at high risk of harming themselves or others, or they are gravely disabled and unable to provide for their own basic needs. A few HMH patients have committed a criminal act and later were found to be incompetent to stand trial. Many of the patients lack impulse control and some have medical concerns, including more serious psychiatric, metabolic and neurological issues.

To meet the unique treatment challenges of these patients, the hospital uses habilitative treatment, which helps patients improve function and social skills, and mental health-oriented treatment that addresses psychotic, emotional or physical issues.

The ultimate objectives of the HMH programs are to increase personal and social competencies, improve overall health, and reduce the likelihood of relapse and decline in the patient's mental state.



Family and Friends

Central, South and East Campuses (PTRC) Visitor Information

Visits and communication with family members and significant others are encouraged as they play an important role in treatment. Visiting hours vary with each program, but generally are from 9:00 a.m. to 9:00 p.m. daily. However, most of the patients participate in active treatment activities from 9:00 a.m. to 11:00 a.m. and from 1:00 p.m. to 3:00 p.m. It is recommended that guests refrain from visiting during those hours.

Visitors should call ahead to schedule a meeting with a patient's treatment team or to participate in the patient's treatment conference. These meetings need authorization from the patient. All guests must sign in at the nurse's station on the treatment unit they are visiting.

For visiting questions and restrictions, please call (253) 582-8900.

Prior to your arrival, please contact ward staff for parking instructions. Due to a recently added fence, parking and visitors entrances are limited.

Conditions for Patient Treatment and Recovery Center Visits

- The treatment team must ensure there is ample staffing and space to accommodate the visit.
- Minors are not allowed on the treatment units.
- Visitors may bring pre-approved items to give to the patient, including non-perishable, factory sealed food items that are to be stored in the patient's snack locker.
- Visitors are not allowed in patient rooms, shower areas or bathrooms. They are not allowed to share patient meals that are provided by the treatment unit or hospital. Visitors may not go to the exercise yard with the patient at any time.
- Visitors must use the staff bathroom and must be monitored by staff when in the staff-only area.
- Unless pre-approved on the visiting form by the treatment team, visitors should have only courtesy communications with other patients on the treatment unit and are prohibited from either receiving or giving anything to patients other than those they are visiting.

Center for Forensic Services (CFS) Visitor Information

Western State Hospital encourages family and friends to visit patients in the Center for Forensic Services (CFS). However, the building's high security requirements call for an extensive pre-visitation process. Please contact the patient's primary therapist or treatment unit social worker for more information.

General rules for patient visitation within CFS:

- Visits must be arranged with the patient's primary therapist.
- Visits are pre-arranged for a specific date and time.
- Visitors must be complete a visiting request and be screened by staff prior to the visit.
- Before entering the secure CFS building, visitors will be searched for weapons or other contraband.

- The primary therapist must pre-approve items that visitors bring to share with patients during the visit.
- Minors are allowed to visit only with CFS patients who have reached a higher level of independence.
- All purses, cell phones, jackets, hoodies, tobacco products and lighters must be stored in the visitor's car or in a locker outside of CFS.
- If CFS Security suspects that a visitor has brought in illegal contraband, such as drugs or alcohol, the Lakewood Police Department will immediately be called. Failure to follow visitation rules may result in the temporary or permanent suspension of visits.

Due to privacy and confidentiality laws, cameras are not allowed on the campus of Western State Hospital. Also, it is a federal offense to bring any type of weapon or illegal drug onto the hospital grounds.

Patient Privacy and the Release of Information

Protecting patient privacy is vital to the hospital's mission and helps increase the patients' satisfaction and sense of dignity. It also helps ensure patients receive the most effective care possible.

Patient privacy generally refers to a patient's right to:

- Decide what personal health information can be shared with others
- Decide how that information is shared, and with whom
- Not have information about him or her discussed in areas where others could overhear

To help protect patient rights, the federal government passed The Health Insurance Portability and Accountability Act (HIPAA). HIPAA mandated that Congress and federal and state agencies pass laws to protect the confidentiality of every patient's records. Due to these laws, hospital staff cannot share any patient information with family members or friends without first having a patient-signed Release of Information (ROI) Form.

If an ROI is not in place and you wish to contact your family member or friend, contact the WSH Switchboard at (253) 582-8900 and leave your name and the name of the person want to contact. Hospital staff cannot confirm that your family member or friend is a patient as the hospital. The information you leave will be passed to the appropriate staff member.

Questions Frequently Asked by Family and Friends

Can we bring favorite snacks and foods from home? What kinds? Are there limits?

Yes. Please bring only enough food for sharing during the visit. The hospital cannot store the food and patients are not allowed to keep it in their rooms. Healthy foods are recommended and check on a patient's dietary restrictions before bringing food to the hospital.

Can we bring vitamins and nutrition supplements from home?

No. The pharmacy provides these items when needed by physician's orders.

Can we bring money for our patient to use in the vending machines?

Money for patients needs to be deposited into his or her hospital account. The ward treatment team's social worker can assist you in making these arrangements.

Can patients call for outside food to be delivered, like a pizza?

This activity would require approval from the ward treatment team.

Can we bring preferred toiletries?

Approval is needed from the treatment team.

How long will our family member be in the hospital?

There is no definite answer, as this is dependent on the patient's response to therapy.

Where will the patient live once discharged?

The treatment team, in partnership with the discharge team, makes arrangements for discharge. A social worker can assist you in providing information with regard to specific options and plans when it is time for a patient to leave the hospital.

Can patients come home for the weekend or for holidays?

Patients are allowed a gradual increase in privileges when they participate in their treatment programs. Contact the treatment team's social worker to discuss home visits.

Can we take our family member out to dinner?

Prior approval from the treatment team is required.

Who do we call if we have questions?

The social worker on the treatment team is a valuable person for you to know. He or she is the contact person representing your family member.

How do we get directions to the right treatment area?

Call the specific ward or the switchboard for directions.

Can we provide electronic items to our family member like cell phones, cameras, or laptops?

No cameras are allowed on the grounds. With the approval of the treatment team, a basic cell phone without photo capabilities may be provided. Laptop computers also require prior approval, but internet connection is not allowed. The hospital takes no responsibility for these items in the event they are damaged or misplaced.

If I provide a cell phone, will my family member have texting privileges?

The use of all electronic equipment requires approval of the treatment team.

When can I talk with my family member's doctor?

Contact your ward treatment team about the possibility of attending a treatment conference, during which you'll have the opportunity to meet all members of the treatment team and contribute to the conference, as well. Patients must first give permission for you to attend.

How can I see the medical record for my family member?

Patients must first sign a Release of Information form stating who is allowed to see these records. The ward social worker can assist you.

Can I bring in a birthday cake or other celebration treats for the whole ward to enjoy?

Birthday cakes are provided to each ward monthly to celebrate birthdays.

Can I bring in gifts, flowers, food treats to thank the ward staff?

No gifts, please. Flowers for the ward, if not in glass containers, may be acceptable, but check for specific requirements. We request that you do not bring food treats to the ward. Cards and letters of appreciation are always enjoyed by staff.

Are we able to take photos with our family member?

Cameras and photographs are not allowed on hospital grounds. For more information, contact the ward's charge nurse or speak to someone in the Hospital Administration office by calling (253) 582-8900.

A Typical Day in the Patient Treatment and Recovery Center

Patients in the PTRC wake up at around 6:00 a.m. complete their morning hygiene activities, and are in line for medications at 7:00 a.m. After breakfast, patients attend classes and group sessions. They return to their wards for lunch, medications and a time to relax.

After afternoon classes, patients return to their wards and attend a daily community meeting. Dinner is served at 5:00 p.m., followed by evening activities on the ward. These can include basketball and yoga, movies, karaoke, bingo and art in the Art Center. Medications are administered at 8:00 p.m. and patients are usually asleep by 10:00 p.m.

A Typical Day in the Center for Forensic Services

Patients receiving forensic services attend morning sessions that focus on the courtroom process, reducing anxiety, and improving interpersonal effectiveness. After lunch, patients attend another group session. After evening medications, dinner is served, followed by on-ward activities and community meetings. Some NGRI patients participate in vocational rehabilitation program, such as cleaning outside yards and certain areas of the inside facilities. They also operate a treatment mall café.

A Typical Day in East Campus

A patient's day in PTRC-East begins around 6:00 a.m. Following breakfast, they participate in treatment programs such as: exercise, yoga, gardening, book club and music.

Some patients earn the opportunity for grounds privilege. Others stay on the ward and relax or attend to personal needs. After lunch, active treatment programs are led by psychologists, social workers, and rehabilitative services staff. Throughout the day, a psychologist, psychiatrist, physician and social worker, along with nursing staff, are available for consultation. Following dinner, patients can relax or use ground privileges. Snacks are offered before bed.

A Typical Day in Habilitative Mental Health

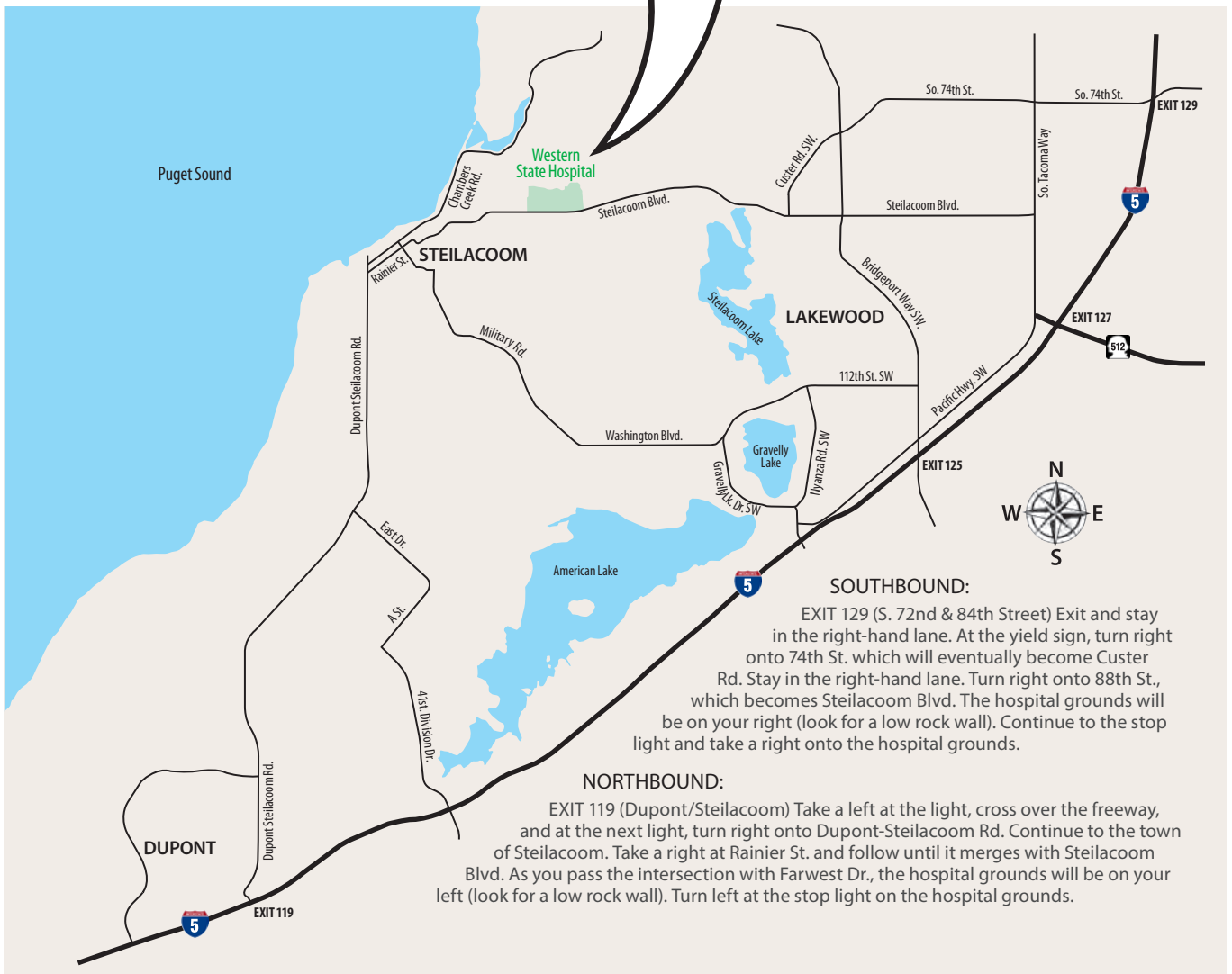
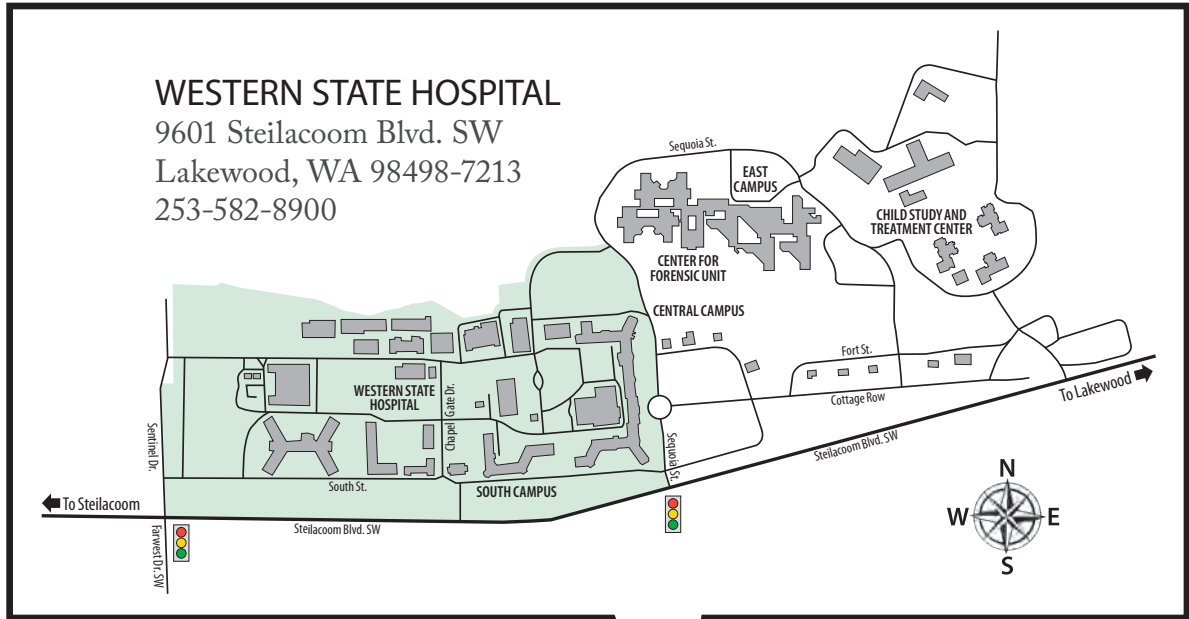
During the week, most of the patients in the HMH program attend the Seeking Independence Through Employment program, where they work at the laundry, recycling, on the grounds crew or at the Java SITE. The work day follows breakfast. Patients not in the SITE program are offered active treatment groups or alternate work activities on the wards. Some patients help run the Fashion Center. Lunch is served at 11:30 a.m. and afternoons are spent relaxing in their rooms or the courtyard. After dinner recreational opportunities are offered, including card games, movies and community activities accompanied by staff. Patients can participate in an exercise group, yoga, choir, karaoke Fridays and football on TV. Counselors are available at all times.

Volunteer Services

Western State Hospital Volunteer Services supervises community members and staff who volunteer at the facility and oversees donations to patients and programs.

- Ongoing Volunteers: Adults (18 or older) interested in volunteering can call (253) 756-2722. The office will provide applications and background check forms.
- Community Groups and Performers: Organizations or performers interested in offering a one-time show or event should contact Volunteer Services at (253) 756-2722. Participants are required to complete applications and background checks. Patients enjoy music and other performances as well as bingo parties hosted by community groups.

Directions to the Hospital



NAMI's Main Office:

NAMI Washington
7500 Greenwood Avenue N.
Seattle, WA 98103
206-783-4288
www.namiwa.org

NAMI Affiliate Offices:

NAMI Chelan/Douglas Counties
509-393-0437
www.namicd.org

NAMI Clallam County
360-452-5244

NAMI Eastside (King County)
425-885-6264
info@nami-eastside.org
www.nami-eastside.org

NAMI Greater Seattle (King County)
206-783-9264 or 800-782-9264
supportlink@nami-greaterseattle.org
www.nami-greaterseattle.org
www.namiskc.org

NAMI Jefferson County
360-385-1716
namijeffco@yahoo.com
www.namijeffcowa.org

NAMI Kitsap County
360-415-5800
info@namikitsap.org
www.namikitsap.org

NAMI Kittitas County
509-925-5048

NAMI Lewis County
360-880-8070

NAMI Pacific County
360-783-1610

NAMI Palouse
208-835-3071

NAMI Pierce County
253-677-6629
info@namiierce.org
www.namiierce.org

NAMI Skagit County
360-424-5802
namiskagit@gmail.com
www.namiskagit.org

NAMI Snohomish County
425-339-3620
nami.snohomish.county@gmail.com
www.namisnohomishcounty.org

NAMI South King County
253-854-6264
namiskc@qwestoffice.net

NAMI Southwest Washington
360-695-2823
info@namiswwa.org
www.namiswwa.org

NAMI Spokane
509-838-5515
office@namispokane.org
www.namispokane.org

NAMI Thurston/Mason Counties
360-493-6021
namitm@live.com
www.namitm.org

NAMI Tri-Cities
509-946-8291
namitricities@gmail.org
www.namitricities.org

NAMI Washington Coast
360-268-2385
nami@nami-wacoast.org
www.nami-wacoast.org

NAMI Whatcom County
360-671-4950
nami@healthsupportcenter.org
www.namiwhatcom.org

NAMI Yakima
509-453-8229
office@namiyakima.org
www.namiyakima.org

NAMI

The National Alliance on Mental Illness (NAMI) is a nationwide, non-profit organization that assists individuals and families touched by the challenges of mental illness. Washington has 22 independent NAMI affiliates. Each affiliate offers a mix of no-cost services to meet local needs.

Most of the 22 NAMI Washington affiliates hold weekly, peer-led and recovery-support groups for individuals with mental health diagnoses. These groups are called NAMI Connection. Many of the local affiliates also offer NAMI Family Support Group for family members, caregivers and friends supporting or caring for a loved one with mental illness. All groups are confidential and group leaders are trained by NAMI to keep the discussions focused and emotionally safe.

NAMI Classes: Real World Mental Health Education

Family-to-Family: A 12-week course for families, partners and friends of individuals with serious mental illness. The course focuses on the emotional responses families have to the trauma of mental illness.

Peer-to-Peer: A 10-week recovery education course open to any adult with a serious mental illness. Peer-to-Peer emphasizes recovery from mental illness as a feasible, supportable goal and challenges the stigma associated with mental illness.

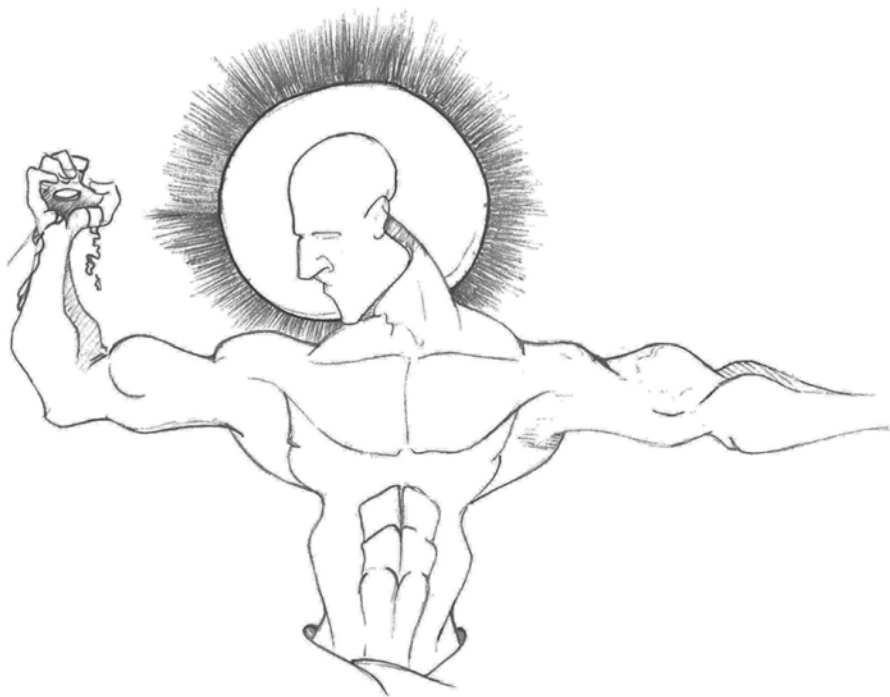
Basics: A six-week course developed specifically for parents and other family caregivers of children and adolescents who have either been diagnosed with a serious mental illness, a serious emotional disturbance, or who are experiencing symptoms but have not yet been formally diagnosed.

Homefront: A six-week course for families, caregivers, and friends of active-duty military members and veterans with mental health conditions. Based on the nationally recognized NAMI Family-to-Family program, NAMI Homefront is designed to address the unique needs of families, caregivers, and friends of those who have served, or are currently serving, our country.

NAMI Community Education Programs

In Our Own Voice: A unique public education presentation that offers insight into the hope and recovery possible for people living with mental illness. Trained individuals living with mental illness lead a brief, yet comprehensive interactive presentation.

Other Programs: Though not all of these programs are available at every NAMI Affiliate. Larger affiliates often have an even wider range of services such as youth groups, club house programs, crisis intervention training, suicide awareness groups, and lecture series. Call a local NAMI Affiliate to find out what help is available nearby. Contact information is listed on the following pages.



Peer Counseling and Helpful Web Sites

Become a Peer Counselor or Advocate

Peer support is when people who have had success dealing with life challenges help others with similar life challenges. Alcoholics Anonymous is an example of people helping other people recover for over 70 years. There are many other organizations where persons with mental health conditions can find peer support, including the National Alliance on Mental Illness, the Bipolar Support Alliance, Schizophrenics Anonymous and WA Dads.

Washington State has developed training for persons to become certified peer counselors (also called peer-support specialists). These individuals with a history of mental illness and recovery are willing to use their stories and first-hand experiences to help others. Peer counselors work one-on-one with individuals to assist them in areas such as identifying recovery goals or traversing the mental health system. They also facilitate groups and wellness skills classes and lead stigma-reducing activities. Many community mental health centers throughout the state employ certified peer specialists. There are even peer-run mental health facilities in Washington: the Capital Recovery Center in Olympia, Consumer Voices Are Heard (CVAH) in Vancouver and Mount Vernon, and Passages in Spokane.

If you are interested in becoming trained and certified as a peer counselor, you can get updated information about qualifications, applications, and trainings from the DSHS Division of Behavioral Health at (888) 713-6010. There is also the standard training program for peer counselors and specialized training for Youth and Family Peer Counselors. Specialized training is being developed for peers in recovery who have dual diagnoses, i.e. chemical dependency and mental health conditions.

Useful Websites

- American Diabetes Association: <http://www.diabetes.org/>
- American Foundation for Suicide Prevention: <https://www.afsp.org/>
- American Psychological Association: www.apa.org
- Academy of Nutrition and Dietetics: <http://www.eatright.org>
- Anxiety and Depression Association of America: <http://www.adaa.org/supportgroups>
- Crisis Clinic: <http://crisisclinic.org/>
- Department of Social and Health Services – Washington: <https://www.dshs.wa.gov/altsa>
- Depression and Bipolar Support Alliance: <http://www.dbsalliance.org>
- Disability Right Washington: www.disabilityrightswa.org
- DSHS Mental Health and Addiction Services: <https://www.dshs.wa.gov/mental-health-and-addiction-services>
- DSHS Mental Health Fact Sheets: <https://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/mental-health-fact-sheets>

- Mayo Clinic’s “Healthy Lifestyles:” <http://mayoclinic.org/healthy-lifestyle>
- Mental Health America: <http://www.mentalhealthamerica.net/>
- National Alliance on Mental Illness (NAMI): www.namiwa.org
- National Institute of Mental Health: www.nimh.nih.gov
- National Suicide Prevention Lifeline: <http://www.suicidepreventionlifeline.org/>
- SAMHSA’s national helpline for individuals and families facing mental health and/or substance abuse disorders: <http://www.samhsa.gov/find-help/national-helpline>
- Substance Abuse and Mental Health Services Administration: www.samhsa.gov
- U.S. Department of Health and Human Services: <http://www.mentalhealth.gov/>
- Washington Recovery Helpline: <http://www.warecoveryhelpline.org/>
- Western State Hospital Homepage: <https://www.dshs.wa.gov/bha/division-state-hospitals/western-state-hospital>
- WRAP Info Center: www.mentalhealthrecovery.com

Western State Hospital

"To promote recovery and well-being in partnership with the people we serve."

For immediate help:

- For life-threatening emergencies, call 911
- For suicide prevention, call (800) 273-8255. TTY Users (800) 799-4TTY
- For 24-hour crisis counseling, call Washington Recovery Help Line at (866) 789-1511

Use the following lines to keep track of important contact information during your stay at the hospital.

Aerial View of the Hospital Grounds

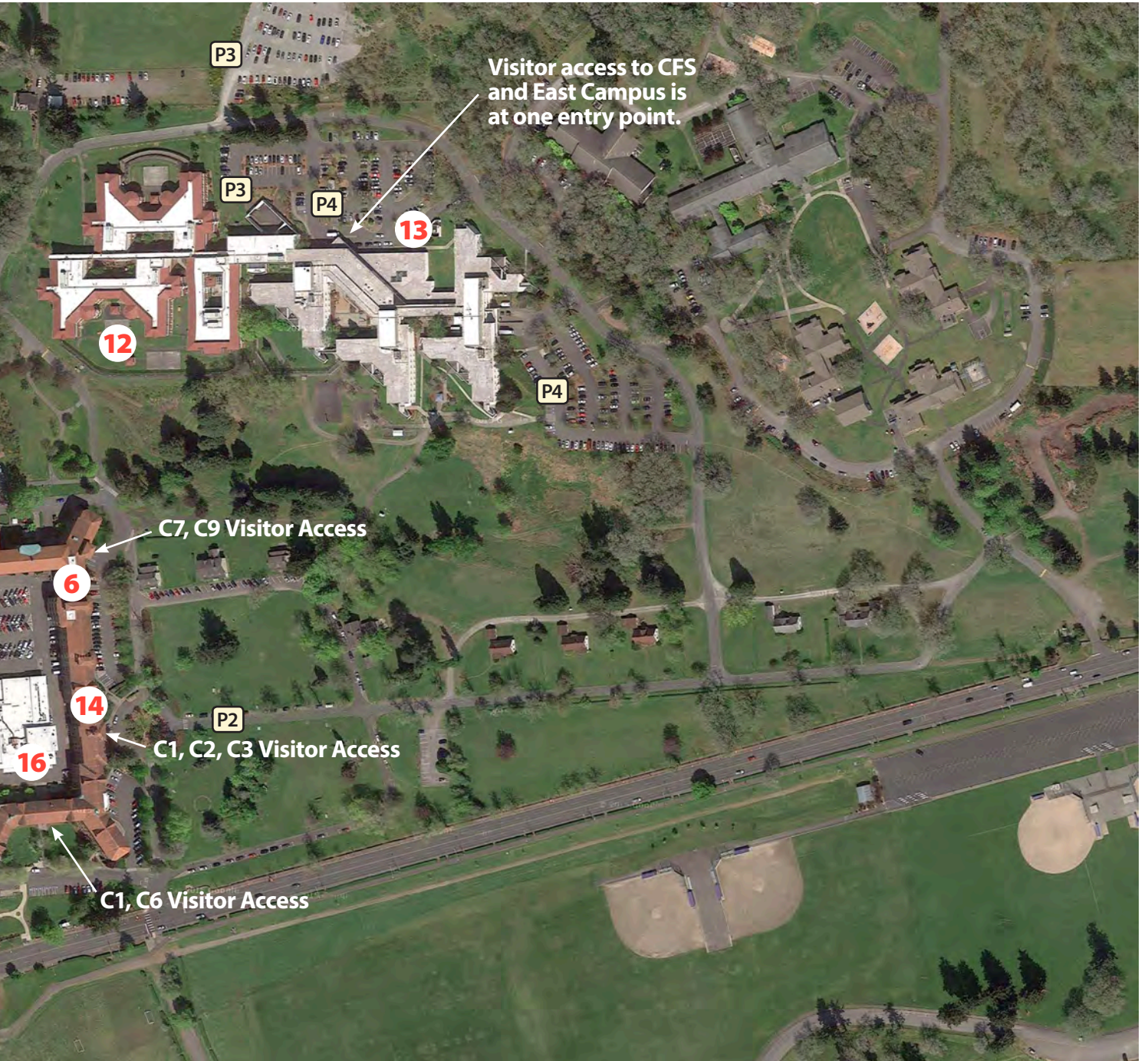


WESTERN STATE HOSPITAL

- 1 HMH
- 2 Gymnasium (closed)
- 3 Infinity Center
- 4 Art Center
- 5 Library
- 6 Central Hall
- 7 PDR
- 8 South Hall
- 9 Chapel
- 10 Legal Services
- 11 Education Services
- 12 CFS
- 13 East Campus
- 14 Administration

Security fence

- 15 Fashion Center
- 16 Java Site
- P1** Visitor Parking for South Hall
- P2** Visitor Parking for Central Hall
- P3** Visitor Parking for CFS
- P4** Visitor Parking for East Campus



Notes



Washington State
Department of Social
& Health Services

Transforming lives

The Washington State Department of Social and Health Services

DSHS 22-1645 (3/16)