Dear Patient and Family,

Welcome to Spring Harbor Hospital. We know that coming to a hospital may be difficult for you and your family. Please know your needs and well-being are important to us and we want to make your stay as therapeutic and helpful as possible.

This is an educational packet for you and your family members to use during your stay. It provides information about the unit/service on which you will be staying, your Treatment Team care providers and treatment programming which is the day to day activities you will be participating in during your stay.

We look forward to working closely with you and your family. Your active participation is an essential part of the recovery process.

Sincerely,

The Child and Adolescent Services Staff at Spring Harbor Hospital
Child & Adolescent Services

Patient and Caregiver Handbook

Contact Us:

Hospital Front Desk:  (207) 761-2200 or toll free 1-888-524-0080
1NE Nurse’s Station:  (207) 661-6341.
1NW Nurse’s Station:  (207) 661-6310.

Spring Harbor Hospital
123 Andover Rd
Westbrook, ME 04092
www.MaineBehavioralHealthcare.org

Fax:  (207) 661-6270

This handbook is provided to give patients and guardians/caregivers important information about treatment and care while at Spring Harbor Hospital. Please use this information as a resource and let us know if you have any questions.
WELCOME TO CHILD AND ADOLESCENT SERVICES

We are a 28 bed service housed on two adjoining physical units, 1Northeast (1 NE) and 1Northwest (1NW). We serve patients age 4-20. Younger children will always be placed on 1NE, however adolescent children may have a room on either unit due to there being more adolescents than children in need of our services. Please note: It is possible their room may change during their stay, for a number of reasons.

Regardless of where your child's room is, they will participate in programming with a "track" of developmentally similar peers. The tracks are given color names (Yellow, Purple, Green and Red). Each track has its own programming, including therapeutic groups, meals, outside time, art, gym, school and activity times throughout the day. If you would like to know how your child is spending their day, please take a track schedule located at the nursing station that lists groups and times. Weekday and weekend schedules differ somewhat and the groups and times are all listed.

WHO IS CARING FOR AND TREATING MY CHILD?

You: parents and guardians are essential to the care and treatment of their children. We recognize that you are the expert on your child and we are here to help you and your child through this crisis. You will be asked to provide information about your child’s history, share an understanding of your home’s environment and let us know what has worked and what hasn’t. We will ask you to participate in family meetings and invite you to ask questions about any aspect of treatment.

Clinical Social Worker: meets individually with your child, meets with the family, connects with community providers and may facilitate clinical groups. Typically the Clinical Social Worker (LCSW or LCPC) is the point of contact for families with questions about treatment and discharge planning. If you have a question and are not certain who to call, the Clinical Social Worker is a good place to start.

Psychiatry: meets with your child every day during the week and at least once per weekend to plan treatment and assess the use of medications. Psychiatry staff in the hospital includes: Psychiatrists, Nurse Practitioners (NP) and Physicians Assistants (PA).

Nurse Manager: oversees the nursing staff on the unit. There is one Nurse Manager for Child and Adolescent Services.

Charge Nurses: there is a Charge Nurse (RN) on each unit, 1NE and 1NW. They do everything that other RNs do, as well as managing the therapeutic setting and program. The Charge RN is
your best point of contact for nights and weekends regarding your child and they are available for updates on your child’s progress.

**Nurses:** there is always a nurse on the unit. Nurses dispense medication, take vital signs, monitor health and well-being as well as facilitate a nursing group (RN Group) each day. If Charge RN is not available, please see a nurse for an update. Your child will be assessed individually by a nurse each day of their stay.

**Occupational Therapist:** will assess your child and will facilitate therapeutic groups to teach and practice coping skills. These groups are often called “OT Groups.” Your child will have OT assessment after admission and may see an OT up to 10 times weekly in various settings throughout the hospital. They may also do sensory processing evaluations to provide different types of environmental and activity recommendations to help your child stay calm and regulated throughout the day, both during hospitalization and after they are discharged.

**Psychiatric Technicians (Psych Techs):** this is the direct care staff that is with your child around the clock. They support your child throughout the day by skills coaching, modeling safe and appropriate behavior, helping them understand good boundaries, supporting/running programming encouraging hygiene and keeping your child safe. They follow up closely with nurses for any behavioral, safety or medical concern.

**TREATMENT TEAM**

Treatment Team is a term that is used frequently and can have different meanings. Essentially "Treatment Team" refers to the people who gather to discuss and implement treatment for your child. The primary Treatment Team for your child is the Clinical Social Worker and Psychiatry staff assigned to your child.

When we meet with you (and your child if they are able to participate) to discuss treatment and planning, we consider this to be a Treatment Team meeting. We may include your outside providers, such as case managers, outpatient clinicians, school social workers and other family members (if appropriate) in these meetings, with your permission.

The clinical staff comes together each morning for a Unit “Treatment Team” Meeting to review each child and discuss treatment. Often there are consultants from other parts of the hospital, such as pharmacy or dietary, interns and students or members of our outpatient team that join us to consult on different cases.

It is important for us to foster good communication between our medical care professionals, our patients and their families. Spring Harbor Hospital views communication as a vital aspect of our patient care services. This is one of our Quality Improvement Initiatives and we welcome your feedback.
Quick Reference:

My Child’s Clinical Social Worker is: ______________________
Phone: ______________________
Medical Staff: ______________________
Unit: 1NE or 1NW
Unit Phone: ______________________

WHAT DOES TREATMENT LOOK LIKE?

Average Hospital Stay

Parents and children often ask this question at admission and have frequently been given different answers about how long the hospitalization will last. In truth, length of stay varies. The average length of stay is around 7-14 days. You will work with your treatment team to understand the goals of the admission and to determine when your child is ready for discharge. We will always talk with you directly about discharge plans and we will be sure you receive this information firsthand and not, for example, from your child when you come to visit.

Goals of Inpatient Treatment

- To stabilize the immediate crisis situation
- To offer education about diagnosis and behaviors, to caregivers and the child
- To assess if a medication might help manage your child’s symptoms
- To help you and your child build skills to manage crisis behaviors outside of the hospital
- To help you access resources in the community to better support your child
- To create a discharge plan that will help maintain stability at home, in the community and/or at the next level of care

Programming and Treatment

Each child and adolescent participates in a program with a group of peers in a developmental and age appropriate “track” that we identify as a color (Yellow, Purple, Green, and Red). They will attend programming through the day with their group. Please talk with your treatment team or the Charge Nurse if you have questions about your child’s programming, as each child has their own unique set of needs.
Clinical Skills and Education Groups

Different clinical groups are included in the programming, and might include the following:

DBT Skills group (Dialectical Behavioral Therapy), Mentalization skills group, Substance Abuse, Occupational Therapy, and Nursing Group (RN Group). These groups teach coping skills, self-regulation, stress and anger management, communication skills, distress tolerance, emotion regulation, symptom and diagnosis education, Activities of Daily Life (ADL’s), health and wellness and social skills.

Recreational Therapy Groups

Daily programs offered include an art group, at least two physical movement groups (often gym and yoga). There is an art room, an indoor gymnasium and courtyards outside, including a volleyball court and a playground.

Learning Lab/ School

Your child will attend the learning lab for 1-2 hours per day based on their identified group, determined by student age and developmental needs. The children and adolescents are expected to participate in our learning lab program offered by the Westbrook School Department during regular school days. The special education teacher in the learning lab provides educational activities designed to meet the needs of the patients. Once parents sign the educational release form, a tutoring agreement is sent to the patient’s school district. Upon return of the agreement, coordination of work and programming can take place. When your child returns to school, progress notes are sent to their school district reflecting the work completed. We find that it is most beneficial when schools send assignments for students to complete, particularly at the high school level so that they do not get behind in their work. We recommend a re-entry meeting upon discharge to address patient needs.

ROOMS

There are a few private rooms; however most of our rooms are semi-private, which means that your child will have one roommate. Their room may change during the hospitalization for a variety of reasons, both clinical and practical. Patients may not enter other patients’ rooms for any reason. Patients are asked to always use the bathroom when changing clothes, for their privacy.

It is an expectation that rooms are kept clean and tidy. There are designated times in the morning to do this. We would like all rooms to be picked up before morning meetings begin. If your child needs assistance with straightening their room, staff is always available to help. Everyone is
asked to clean their rooms and to help with their personal laundry if possible. We have a laundry room on each unit.

PERSONAL BELONGINGS

We have a Patient Belongings Closet where items are kept that can’t stay in a patient’s room. Staff often refers to this room as the “sharps” closet as it is also where we store items that may be unsafe.

We encourage patients to bring a minimum number of toys or personal belongings from home. **Items of value should not be brought onto the unit as we cannot be responsible for lost or damaged toys, electronics or other belongings** – this includes radios, phones, tablets, laptops, video games and cellphones. If your child has a special stuffed animal, blanket, pillow or other object please bring it when the patient is admitted. We ask that all clothing and belongings are marked with your child’s initials. For the younger children, the nursing staff can assist with labeling items.

We recommend that your child have no more than a 3 day supply of clothing. Laundry is done daily. In general, it is helpful to have sneakers for gym, and appropriate clothing to go outside for walks or recreation. If your child’s favorite clothes have drawstrings and want to wear them here, we can take out the strings with your permission.

We ask all patients to dress conservatively and clothing is expected to completely cover underwear. Your child may be asked to change shirts, pants, put on additional layers or use Velcro belts.

PHONE CALLS and VISITS

SHH encourages guardians and caregivers to keep in touch with patients during their stay. The hospital front desk number is *(207-761-2200)* or toll free *(1-888-524-0080)*.

1NE Nurse’s Station: 661-6341  
1NW Nurse’s Station: 661-6310

Please be advised that outgoing calls from SHH may be identified by Caller ID as a generic number: 662-1990 Portland, ME.

We have recommended times for phone calls that cause the least disruption to treatment programming. Suggested visiting hours for Child and Adolescent Services are around meal times and evenings. Please refer to the Visitor Brochure in this Welcome Packet for more information. Visitors under age 18 need to be supervised at all times by a guardian.
You are welcome to bring food for a snack or to have a meal on the unit with your child. Please bring leftovers home with you as food cannot be stored on our unit. We do not allow caffeine on our units and require that beverages have an intact/unopened seal and are not glass or cans.

**TTVs**

TTV stands for: Trial Therapeutic Visit. It allows a child to go outside of the hospital with family or community providers. When your child is closer to their discharge date, the treatment team may want to send the child on a TTV. Trial Therapeutic Visits are an opportunity for you and your child and the rest of the family to practice the skills learned on the unit and in family sessions. These visits may take place on or off grounds, and your child must be accompanied by a guardian. TTVs may be arranged with the Clinical Social Worker in advance, to allow for discussion around goals and to review a safety plan. A TTV will require a written order from Psychiatry staff.

The nurse will assess your child before leaving, and they will be searched upon their return to the unit.

**MEDICATIONS AND MEDICAL PROCEDURES**

Medications are an important part of many patients’ treatment plans. Medications are given from the Medication Room (Med Room). The psychiatry provider or nurse will tell you about any medications such as: what it is, when to take it, why it is prescribed and possible side effects. Educational material can be provided by psychiatry or nursing staff. Written consent from adolescents over 14 and their guardian is required before medications or certain medical procedures can be provided. Please bring any questions or concerns about medications to medical providers.

Verifying patient identity is one of the many ways SHH protects your safety. One form of identification (ID) is with a photograph, which is taken at the time of admission. The other is date of birth (Month & Day), which is printed on the photo. Your child will be asked to repeat their birth date before they receive medications and for certain procedures.

**COMMUNICATION AROUND SAFETY**

Communication with patients and families is an important part of achieving safety. If you have any safety concerns about medications, treatment or the environment, we would like to hear about them. Please contact a member of your child’s treatment team and/or the Nurse
Manager to discuss your concerns. You may ask for them in person or call (207) 761-2200 or toll free (888) 524-0080. We appreciate your help in promoting safety at our hospital.

CONFIDENTIALITY

Confidentiality is an important issue and is always a priority with our professional staff. When information is released, we only share the information that is relevant to the contact. We will contact outpatient mental health and primary care providers for continuity of care purposes. As the parent or guardian, you will be asked to sign Releases of Information so that we can share information and documentation to your outpatient providers or to make referrals; often the Clinical Social Worker will review these releases with you and answer questions you may have. We ask that all visitors respect the confidentiality of others who are on the unit, as everyone has a right to privacy. For this reason, we do not allow patients or visitors to bring cell phones, cameras, video cameras, tape recorders or other devices with cameras or other recording ability on the units.

PATIENT RIGHTS

Spring Harbor Hospital upholds the rights of all patients, above all the right to be treated with respect and dignity. The rights of individuals in Maine who are receiving mental health treatment are protected by both state and federal law, as well as by other licensing and regulatory provisions. The Rights of Recipients of Mental Health Services contains the regulations, which protect your child’s rights. There are copies of this booklet available in each patient care area. Please ask ANY Clinical Social Worker for a copy if you would like one.

You and/or your child have the right to contact an advocate at any time, either your personal advocate or representative or one of the agencies listed below:

Disability Rights Maine (DRM)

Available during typical business hours (8 AM – 5 PM, Monday - Friday) -- during other times, you can leave a confidential voicemail message.
Phone and TTY: (207) 626-2774 or 1-800-452-1948

Disability Rights Maine
24 Stone St
Augusta, ME 04330
National Alliance on Mental Illness (NAMI Maine)

This organization provides support to patients and their families. The NAMI Maine Help Line can be reached at 1-800-464-5767

For more information about your rights or your stay, you may request the following resources:

- Unit Schedule
- Resources in the Greater Portland Area
- Cafeteria Guidelines & Nutritional Information about Food
- Rights of Recipients of Mental Health Services
- Bates Settlement Agreement
- Adult Mental Health Services Consent Decree Plan
- Involuntary Hospitalization Brochure

WHAT TO DO IF YOU HAVE CONCERNS

We hope your child’s stay here is helpful. If there are any concerns or complaints during this stay, we would like the opportunity to discuss them with you and your child in an effort to make things right. Please see the Charge Nurse on your unit or the Clinical Social Worker assigned to your child to discuss your concerns. If you do not feel your concern was resolved, please ask to speak to the Nurse Manager for Child and Adolescent Services at 207-761-2200. If these approaches do not lead to a satisfactory result, or if you would prefer not to discuss your concerns with the care provider, you can contact the Patient Rights Liaison at 207-761-2200.

You and/or your child have the right to file a complaint or grievance with the Maine Department of Human Services, Division of Licensing and Certification, at (207) 287-9300 or 1-800-791-4080. Their mailing address is: 41 Anthony Avenue, State House Station 11, Augusta, ME 04333.

Thank you for giving us the opportunity to work with you and your child!