



Welcome to the Inpatient Psychiatry Unit A helpful guide for caregivers

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WELCOME

Dear Caregivers,

The Department of Psychiatry at Nicklaus Children's Hospital has set up this handbook to help answer some of the questions you may have regarding your child's stay with us. Be assured your child will receive first quality care by our dedicated and professional staff. If you should have further questions or concerns, please contact us at:

Nicklaus Children's Hospital – Department of Psychiatry

Main Office phone number: 305-663-8439 Nursing Unit number: 305-666-6511 Ext.1075 Toll-Free number - Nicklaus Children's Hospital: 1-800-432-6837 Toll-Free number - Psychiatry: 1-888-920-9977

Customer Service

If you need assistance with questions, explanation of Nicklaus Children's Hospital policies and services offered and/or help to solve problems related to hospital services rendered or your child's care, please contact your nurse or healthcare provider.

If you feel your concerns are not being resolved to your satisfaction, you have the right to request communication with the unit's Nurse Manager, Clinical Director or the Chief Psychiatrist of the Department of Psychiatry.

The Patient/Family representative for the hospital can be contacted by calling 786-624-4400 during regular business hours.

Your complaints will not adversely affect your child's care and we welcome the opportunity to address your concerns and be of assistance.



Our Philosophy

We Believe:

- In the respect, dignity, and value of the individual child and their family.
- In keeping all patient information private within Psychiatry. Both written and verbal information must remain between the patient and clinical team on a "need to know" basis.
- In assuring Patient Rights according to the Florida Mental Health Act and the Nicklaus Children's Hospital Patient Bill of Rights.
- That patient safety is of primary importance; this is provided through a protective physical environment, a high level of staff supervision, and appropriate activities.
- That any suspicions or allegations of abuse or neglect of any kind in treatment through the department will be reported to the Child Abuse Hotline.
- In an interdisciplinary approach to patient care.
- The patient has a right to participate in making choices and decisions regarding their admission, treatment plan, and discharge plan.
- In utilizing the least restrictive method of treatment. Mechanical restraints are not used to control patient behavior. All staff are trained in prevention intervention techniques.
- That therapeutic relationships are based on trust, role-modeling, and establishment of professional boundaries.
- The child is an integral part of the family unit and the family will be involved throughout the course of the child's care.
- The staff, at all professional levels, should be encouraged to improve their current level of skill and knowledge.
- That the input from staff, at all professional levels, is valuable in treatment planning, selection of patient activities, and program development.
- That students/interns/residents add value to the program. We provide them an opportunity to learn and grow based on their academic status.

About Us

Our Unit

Our Inpatient Psychiatry Department is a 20-bed, secured Crisis Stabilization Unit. Your child's safety, as well as the unit's safety is a priority for us and, as a result, we have a zero tolerance policy for acts of violence, verbal or physical.

Our Care

Nicklaus Children's Hospital is a nationally recognized pediatric specialty hospital that has been treating children for 70 years. Through our experience, we have found that the best care is collaborative care. Our unique therapeutic program reflects this philosophy by utilizing the team approach, involving professionals, child, and family to resolve issues. We work together with your family to stabilize your child and determine next best steps for them upon discharge.

Our Patients

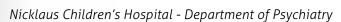
The Department of Psychiatry offers comprehensive mental health services for children, adolescents, and their families. Acute stabilization and diagnostic and treatment services are available. As a Baker Act receiving facility for children and adolescents, designated by The Florida Department of Children and Families, services are provided to patients who range from 4 to 17 years of age.

Purpose of Hospitalization

The Department of Psychiatry offers a wide range of psychiatric treatment for your child, including inpatient and outpatient services. We also have an Intensive Outpatient Program. The length of treatment is based on your child's clinical progress, as determined by the treating psychiatrist and the interdisciplinary treatment team. Discharge planning begins the day your child is admitted to our unit.

Family Involvement

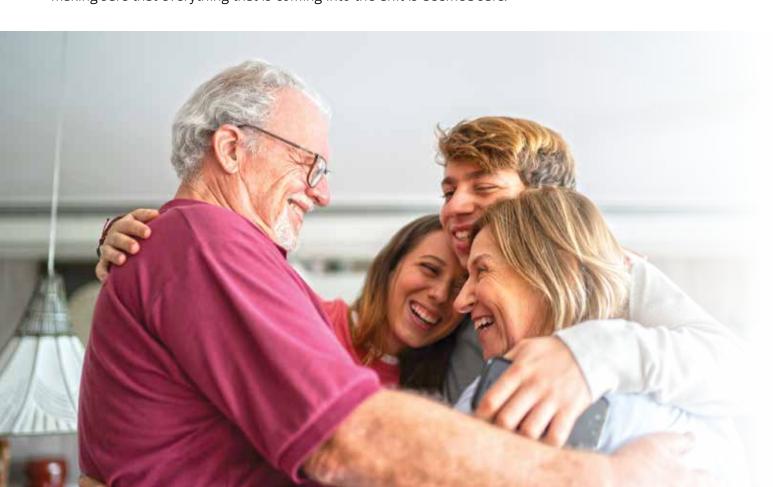
Our program places great emphasis on family involvement in the care of the patient. This is made possible in a number of different ways. Family therapy sessions usually begin within the first couple of days of your child's admission. Regular visits with your child are encouraged. Please read "Visitation Guidelines" section of handbook for times and restrictions.



Admission Process

The admission process requires several steps. They are as follows:

- 1. When you come into the unit, a nurse will meet with you and your child to begin the admission process.
- 2. For safety and the protection of your child's confidentiality, you will be provided with a confidentiality code. This code number is necessary when seeking information or contact with the patient. Please keep this number secure and distribute only to necessary parties, as patient information can be accessed with disclosure of this number.
- 3. You will be assigned a date and time to come in for a family therapy session.
- 4. You, as the legal guardian, will be asked to sign consent forms and fill out several documents. They are as follows:
 - Application for Voluntary Admission
 - Notice of Right to Request Discharge
 - Notice to Guardian
 - Patient's Rights
 - Notice of Right to Petition for Writ of Habeas Corpus
 - Authorization for Psychotropic Medication
 - Educational Alternative Outreach Program
 - o Schooling provided for Miami-Dade County Public Schools, with the exception of McKay Scholars
 - Treatment Plan
 - Telephone Log
- 5. Within 24 hours of your child's arrival to the unit, a psychiatrist and a nurse practitioner will meet with the patient.
- 6. Two behavioral health techs will conduct a patient search and a quick inventory of your child's belongings, making sure that everything that is coming into the unit is deemed safe.



Patient's Belongings

Items we recommend you bring for your child:

- a. 3-5 pairs of underwear
- b. Sports bra (if needed)
- c. 2 pants
- d. 2 shirts
- e. 2 sweaters (NO strings)

Items that will **NOT** be allowed:

- a. Blankets
- b. Clothing with foul or inappropriate content
- c. Crop tops or shirts that show midriff
- d. Jewelry of any kind
- e. Makeup
- f. Perfume or body mist

- g. Shoes with shoe laces
- h. Shorts above the knee
- i. Tampons or pads*
- j. Teddy bears
- k. Towels
- We will provide your child their hygiene essentials, such as toothbrush, toothpaste, mouthwash, bar soap, shampoo, lotion, hairbrush, hair comb, socks, and sanitary pads*.
- Any medication you bring for your child must be given directly to the nurse.

*Provided as neeeded.



Visitation Guidelines

When visiting, the parent or legal guardian or authorized persons will have to provide our staff a confidentiality code. Without the confidentiality code, we will not be able to allow visitation.

The following guidelines are designed to ensure safety in the unit and allow the patient to focus their attention on their goals:

- 1. Visiting hours are daily from 5:00 p.m. 7:00 p.m.
- 2. Visitor's cellphones, purses, and/or any belongings not intended for your child must be placed in the lockers located outside of the unit.
- 3. Patients may have a maximum of two (2) visitors at one time.
- 4. Minors under the age of 18 must be accompanied by an adult.
- 5. Any personal items that are being brought in for your child must be given to staff. Nothing should be given to your child directly.
- All items brought to the patient will be inspected by a behavioral health tech. We check to make sure all items are appropriate and safe.
- Nearing the end of visitation time, your child may give you any items that may be taken home, including dirty clothes that need to be washed.
 Those items will be signed out by a behavioral health tech to ensure all inventory is accurate.
- 6. Although we provide 3 meals and snacks daily, you may bring your child dinner during this time. Any food items not consumed during visitation times may be taken home with you or discarded.
 - All bags will be inspected by a behavioral health tech.
 - No glass or can containers are allowed. You will be asked to pour sodas in a cup and we will discard cans safely.
 - No knives are allowed, including plastic knives.
- Caffeinated beverages are discouraged.
- 7. Contact the Charge Nurse to make special arrangements if visiting hours conflict with your work schedule.
- 8. Caregivers are NOT allowed to stay overnight in the unit.

Guidelines for Phone Calls

Upon admission, the patient's telephone log should be filled out with names and numbers of those persons with whom you allow your child to contact while in our care—including yours. The patient uses this phone log to call out to those listed. When calling in, the parent or legal guardian or authorized persons will have to provide our staff a confidentiality code. Without the confidentiality code, we will not be able to disclose any information.

Phone use is limited to certain hours so that your child is able to focus on their treatment. Those hours are 12:00 p.m. – 1:00 p.m., 5:00 p.m. – 7:00 p.m., 8:00 p.m. – 9:00 p.m. Staff will closely monitor all patient phone calls. Your child, at any time, will be allowed to use the phone if he/she wants to report any alleged abuse. The abuse hotline is posted in our common area.

When calling outside of our designated call times, please keep in mind that your child may be participating in their scheduled therapeutic activities, groups or individual therapy sessions. Therefore, we may ask you to call at a later time to avoid interruption of these therapeutic activities.

Interdisciplinary Team and Treatment Goals

Treatment guidelines are set up for your child by the interdisciplinary team, which consists of a psychiatrist, psychologist, therapist, nurse, behavioral health tech, and case/intake coordinator. This team meets three times a week to review your child's progress. In addition, this care team guides each patient in setting their own goals and allowing them to actively participate in their individualized treatment plan.



Treatment Team

There is a large interdisciplinary team that will directly or indirectly help your child throughout their stay.

They are as follows:

Director and Manager - Oversees unit operations and provides department supervision.

Psychiatrist - A physician specializing in the treatment of children and adolescents who leads the team of mental health professionals that provide treatment for your child. Their services include the following: Developing and implementing an individualized treatment plan, ordering diagnostic studies, and providing psychotherapy and medications as indicated.

Psychology Team - The Chief Psychologist and one additional Psychologist will be responsible for the clinical supervision of all the mental health counselors and psychology practicum students. Their services include, but are not limited to, psychological assessments, individual, family, and group therapies.

Registered Nurses - Responsible for coordinating and supervising the therapeutic environment which includes direct supervision of the behavioral health techs. Nurses perform assessments and execute physician orders.

Behavioral Health Techs - Provides direct supervision of your child on our unit and focuses on assisting the individual with their treatment goals. They are responsible for creating and maintaining a safe, consistent, and therapeutic atmosphere on our unit.

Case/Intake Coordinators - Responsible for discharge planning, which includes addressing your child's needs, as recommended by the team.

Therapies

Treatment includes an array of traditional and creative therapies and activities within a highly structured environment. Treatment is individualized, based on the developmental and cognitive needs of the patient and their family, and may include some or all of the following:

Individual Psychotherapy – Provided for every child and held regularly per prescription of the treating Psychiatrist.

Group Psychotherapy – Facilitated by the Psychology Team. The group is separated into age-appropriate levels where patients learn the essentials of communication. Insight group therapy is the cornerstone of therapeutic intervention in our program. Patients learn the essentials of communication, enabling them to re-enter their family situations with tools to master conflicts.

Family Therapy – An integral component of your child's treatment plans and goals. The Psychology Team helps facilitate communication between family members particularly surrounding circumstances leading to your child's hospitalization.

Evaluations – Held after each group/activity to evaluate the progress of each patient's advancement towards therapeutic goals and adherence to their behavioral contract.

Collaborative Problem Solving (CPS) – Aims to achieve two primary treatment goals. The first goal is to help adults identify the cognitive factors that may contribute to aggressive outbursts of children and adolescents, such as emotion regulation, frustration tolerance, problem solving, and adaptability skills. The second goal is to help adults become cognizant of three common options, as follows:

- "Plan A," the imposition of the adult's will, greatly heightens the likelihood of a meltdown. This is where the adult's concern is the only one being addressed.
- "Plan C," where the adult eliminates or reduces the problem expectations and only the child's concerns are considered.
- Lastly, "Plan B," where both child and caregiver engage in a process that results in mutually satisfactory solutions to problems or unmet expectations.

Complementary Therapeutic Activities

Recreational Activity – All patients are evaluated daily to participate in activities, including outdoor activities. These are supervised by the behavioral health techs. All activities are geared towards encouraging health interactions through cooperative play. Thus, promoting social skills and increasing self-esteem.

Social Skills Group – Creates a safe environment where patients discuss issues of communication; family and peer relations are discussed. During group, patients are given the opportunity to learn appropriate behaviors expected in public settings. Patients are also educated in proper hygiene and the importance of self-awareness.

Substance Abuse Education – Creates a safe environment where adolescents discuss issues of substance abuse, both personally and/or family history of use. Patients also discuss environmental factors influencing their use of substances, such as peer pressure, gang involvement, family system, and other factors.





General Expectations

- 1. Patients are expected to show respect to staff, peers, self, and property at all times.
- 2. Confidentiality must never be broken. No information about another child or family may be discussed with persons outside of the hospital. This applies to both patients and parents.
- 3. Staff must know where patients are at all times. Therefore, patients must ask permission every time they wish to leave the group.
- 4. Patients should use the hall bathroom (except early morning and bedtime).
- 5. Patients are not allowed to go into any room other than their own.
- 6. Patients are not allowed to be in the bedroom with roommate, except early morning, quiet time, and bedtime, or with staff supervision.
- 7. Drugs, alcohol, weapons and smoking are not allowed.
- 8. All incoming mail is to be cleared (not censored) by the charge nurse. We will provide postage for outgoing mail.
- 9. Patients and family members are not permitted in nurses' station, kitchen, and treatment room without staff supervision.
- 10. No borrowing or lending allowed (i.e., make-up, clothes, food) between patients, families or with staff members.
- 11. All patient rooms are to remain locked throughout the day to protect patient belongings. If necessary, patients may gain access to their room with permission from staff.
- 12. At bedtime, staff will check on patients regularly as a safety precaution.
- 13. Family members/visitors are not allowed to bring contraband inside the unit.

Restraints and Seclusions

Restraints and seclusions are ordered by the doctor in certain emergencies to protect your child from getting hurt or hurting others. If your child needs to be physically held for their protection or the protection of others, it is considered a restraint. It is the philosophy of the psychiatry unit to use least restrictive methods. We do not use mechanical restraints. During a seclusion, your child will be placed in a locked room, alone, while under constant observation by a video camera and staff member.

Once restraints are applied or seclusion is started for behavioral reasons, your child will be continuously re-evaluated to determine if the aggressive behaviors are still present. The restraints will be used until your child is no longer at risk for hurting self or others and up to 1 to 2 hours at a time, depending on your child's age, if necessary.



Frequently Asked Questions

How long will my child need to be hospitalized for?

The length of stay is variable, depending on the progress of your child. Discharge planning begins the moment your child enters the unit. We aim to discharge as safely and as soon as possible. This is dependent on safety, degree of symptom severity, and after-care planning. The psychiatrist or the nurse will keep you up to date regarding changes in your child's length of stay.

Do caregivers need to attend therapies while our child is participating in the program?

Family Therapy sessions are an integral part of our program. It is vital for family members to participate in these sessions as part of your child's treatment goals. These family sessions are also used to determine your child's readiness for discharge and their ability to communicate effectively with family members.

Will my child automatically receive psychotropic medications while at Nicklaus Children's Hospital?

- No, it is your legal right to be involved in all decisions regarding psychotropic medication and treatment while your child is under our care. Parents must give consent before psychotropic medications are given to a patient.
- Emergency Treatment Orders can be used if your child is in emergent need of a psychotropic medication due to self-harm or harming others and we are unable to contact you or obtain consent. This is used as a last resort.

What happens if my child has a medical problem during their stay at Nicklaus Children's Hospital?

The psychiatrist, nurse and/or medical provider assesses your child's medical status through the use of nursing assessments, history & physical exam, lab work (including urine screen and blood screen), and other medical screenings as deemed necessary. Should your child need additional specialized care, we can consult one of our many pediatric specialists for further management.

Can my child receive religious services?

With the Psychiatrist's approval, the nurse can arrange for religious leaders to visit your child.

Will my child have their own room?

Usually, no. We do not have private rooms on the unit. Age, gender, and special precautions will be considered at the time of room assignment.

Will my child have an unexcused absence from school?

With your consent, your child will be registered in the Educational Alternative Outreach Program. Participation in this program will count towards attendance. This applies to Miami-Dade County Public Schools with the exception of McKay Scholars.

Will I receive a letter to show the school my child was in the hospital?

Upon discharge, the nurse will provide a letter stating that your child was at Nicklaus Children's Hospital from the day they arrived until the day they were discharged. This letter does not disclose that your child was specifically in the Psychiatric Unit.

What is a Baker Act?

A Baker act is a means of providing an individual with emergency services and temporary detention for mental health evaluation and treatment, either on a voluntary or involuntary basis.

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