

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 1:	Ethics, Rights and Responsibilities
PROCEDURE 1.18:	Patient Communication and Restriction of Communication
REVISED:	06/08/07, 04/07/09, 10/1/14; 02/18
Governing Body Approval:	11/13/14; 04/18

PURPOSE: To allow patient communication by mail, telephone, and with visitors to the greatest extent possible without interfering with treatment, creating security risks, infringing on individual rights, or causing harm to the patient or others. Connecticut General Statutes, Section 17a-546 and 17a-547 were referenced in the development of this procedure.

SCOPE: All clinical staff and nursing staff

PROCEDURE:

I. Communication via Mail (mail includes items in envelopes or packages sent and delivered by the United States Postal Service and private carriers)

A. Outgoing mail

1. Patients are allowed to send mail.
2. When requested, patients will be provided writing materials. Postage for regular first class mail is provided. Costs beyond regular first class postage may be the responsibility of the patient. The cost of mailing packages is the responsibility of the patient and is typically handled through Patients' Accounts.

Note: Any incoming/outgoing package is subject to search for security purposes.

B. Incoming Mail

1. Patients have the right to receive sealed mail.
2. Staff may request, and in some divisions require, that mail received by patients be opened in their presence to check for prohibited or restricted items, however, staff are not to read patient mail without permission.

C. Restrictions on outgoing/incoming mail

1. Restrictions to outgoing mail are implemented in response to a complaint of threatening or harassing mail being received and/or the existence of a restraining or other official court order restricting communication.
2. Restrictions to outgoing or incoming mail may be implemented if:
 - a. the patient's treatment is being compromised by sending/receiving mail;
 - b. sending/receiving mail is judged to be medically harmful to the patient;

- c. the patient requests not to receive mail from an identified party; or
 - d. an extraordinary volume of mail is being sent.
3. If patient mail needs to be restricted on an emergency basis the doctor imposing the restriction will write a medical order describing the limitation, and a progress note describing the circumstances that prompted the emergency restriction. The restriction will be reviewed by the treatment team on the next business day. Whenever restrictions are placed on the patient's mail the treatment team meets with the patient to discuss these restrictions and the reason(s) why. The patient will be provided a reasonable opportunity to discuss the restriction.
 4. This treatment team meeting is documented in the medical record. Whenever restrictions on mail are instituted, the Restriction of Communication form ([CVH-596](#)) is completed and reviewed with the patient by the Division Medical Director/designee. The form is filed in the Legal Section of the medical record and a copy is provided to the patient.

Note: If the restriction on mail is in response to a concern that the mail is medically harmful to the patient, a copy of the Restriction of Communication form is sent to the patient's family and any known relevant parties who send mail to, or receive mail from the patient. The patient's written consent is required.

5. Restrictions on mail are to be medically reviewed monthly and as part of each treatment plan/review. The Attending Psychiatrist/designated team member is to document this review and its continued justification or reason for discontinuation.
 6. For patients under a restraining or other official court order restricting communication, the expiration date established by the court will be honored by CVH staff.
- II. Communication via phone (including internal hospital phones, hospital cell phones and pay phones)
- A. Outgoing calls
1. Patients are permitted to make phone calls.
 2. Patients are provided access to telephones.
 3. If the patient has phone restrictions (See Section C below) the staff may request to speak with the recipient of the phone call to verify his/her identity.
 4. Patients in ASD may not call other units within the building.
- B. Incoming phone calls
1. Patients have the right to receive incoming phone calls.
 2. If the patient has phone restrictions (See Section C below) the staff may request to speak with the caller for the purpose of identifying the caller.
- C. Restrictions on outgoing/incoming phone calls
1. Restrictions on patients making telephone calls may be implemented when it is determined that a patient's use of the phone has become obscene, harassing, or

threatening calls and/or there is a restraining or other official court order restricting communication.

2. Restrictions to phone calls may be implemented if making/receiving phone calls are judged to be medically harmful to the patient.
3. If patient phone use needs to be restricted on an emergency basis the doctor imposing the restriction will write a medical order describing the limitation, and a progress note describing the circumstances that prompted the emergency restriction. The restriction will be reviewed by the treatment team on the next business day. Whenever restrictions are placed on the patient's telephone calls the treatment team meets with the patient to discuss these restrictions and the reason(s) why. The patient will be provided a reasonable opportunity to discuss the restriction.
4. This treatment team meeting is documented in the medical record. Whenever restrictions on phone use are instituted, the Restriction of Communication form ([CVH-596](#)) is completed and reviewed with the patient by the Division Medical Director/designee. The form is filed in the Legal Section of the medical record and a copy is provided to the patient.

Note: if the restriction on phone calls is in response to a concern that the phone calls are medically harmful to the patient, a copy of the Restriction of Communication form is sent to the patient's family and any known relevant parties who make calls to, or receive calls from, the patient. The patient's consent is required.

5. Restrictions on phone calls are to be medically reviewed monthly and as part of each treatment plan/review meeting. The Attending Psychiatrist/designated team member is to document this review and its continued justification or reason for discontinuation.
6. For patients under a restraining or other official court order restricting communication, the expiration date established by the court will be honored by CVH staff.

III. Restrictions on visitors to CVH

- A. Restrictions to visits are implemented in response to the existence of a restraining or other official court order restricting visits.
- B. Restricting visits may be considered if:
 1. receiving visitors is judged to be harmful to the patient;
 2. visitors are suspected of being under the influence of alcohol and/or drugs;
 3. visitors create a disturbance or annoyance;
 4. visitors engage in offensive behavior; and
 5. visitors disrupt the therapeutic milieu.
- C. Based on the circumstances of the situation, it may be appropriate for staff to contact DMHAS CVH Police and have the visitor(s) escorted from the premises. Consultation with supervisory staff is indicated under such circumstances. If a patient's visitation needs to be restricted on an emergency basis the doctor imposing the restriction will write a medical order describing the limitation, and a progress note describing the

circumstances that prompted the emergency restriction. The restriction will be reviewed by the treatment team on the next business day. Whenever restrictions are placed on the patient's visitation the treatment team meets with the patient to discuss these restrictions and the reason(s) why. The patient will be provided a reasonable opportunity to discuss the restriction.

- D. The treatment team meets with the patient to discuss any restrictions to the patient's visits as part of a treatment planning process.
- E. This treatment team meeting is documented in the medical record. Whenever restriction on visitors is instituted, the Restriction of Communication form ([CVH-596](#)) is completed and reviewed with the patient by the Division Medical Director/ designee. The form is filed in the medical record and a copy is provided to the patient.

Note: If the restriction on visits is in response to a concern that the visits are medically harmful to the patient, a copy of the Restriction of Communication form is sent to the patient's family and any relevant parties who had been visiting the patient. The patient's written consent is required.

- F. Restrictions on visits are to be medically reviewed monthly and as part of each treatment plan/review meeting. The Attending Psychiatrist/designated team member is to document this review and its continued justification or reason for discontinuation. (In Addiction Services Division (ASD), the review occurs at each regularly scheduled team meeting).
- G. For patients under a restraining or other official court order restricting communication, the expiration date established by the court will be honored by CVH staff.