

 <p>Connecticut Valley Hospital Nursing Policy and Procedure</p>	<p>SECTION A: NURSING SERVICE ORGANIZATION</p> <p>CHAPTER 5: PATIENT RIGHTS; CONFIDENTIALITY, TREATMENT, ETHICS, PRIVACY AND DIGNITY.</p> <p>POLICY & PROCEDURE: 5.6 Types of Leave</p>
<p>Authorization: Nursing Executive Committee</p>	<p>Date Effective: May 1, 2018 Scope: Connecticut Valley Hospital</p>

POLICY & PROCEDURE 5.6: Types of Leaves

Standard of Practice:

Nursing staff will prepare the patient prior to an approved leave, provide appropriate personal items and/or medication and identify available resources should potential problems occur.

The Registered Nurse will assess the patient prior to and following the return from leave.

Standard of Care:

The patient can expect to receive a clinical assessment prior to and following a visit to the community.

Policy:

Adequate preparation of the patient and his/her belongings will be made prior to a leave. This will include the documentation of written assessments.

All leaves from the hospital will follow the guidelines identified in the Commissioners Policy Statement No. 69, Health Information Management Manual, Section 3, Chapter 2 and the Freedom of Movement Policy for the specific division within the hospital.

Procedure:

a. Temporary Visit (TV)

A temporary visit/leave may be an overnight visit or a short leave defined as seven days or less. A patient may only leave with the written authorization of the attending psychiatrist or physician who will perform a Mental Status Exam within 48 hours prior to the TV/TL. A RN will clinically assess the patient prior to him/her leaving the unit. Temporary Leaves are specific for PSRB Insanity Acquittes. The patient

must be logged out in the census book and a progress note written which includes information on medications.

b. Leave of Absence (LOA)

LOA Status is used for visits of 8 to 30 days. Authorization must be obtained by DMHAS, Office of the Commissioner prior to patient being placed on LOA Status.

c. Extended Visit Hospital (EVH)

EVH status is used only for patients who have been committed to CVH by Superior Court and have the following legal status:

- Commitment to PSRB – (17a-582)

The EVH Status is used when a patient is admitted to an acute care general hospital. Patients committed under 54-56d, 17a-382, 54-56d(m) can not be medically discharged to a general hospital.

d. Conditional Release

Insanity Acquittes under jurisdiction of the PSRB may be conditionally released versus discharged with approval of the PSRB as noted in a Memorandum of Decision (MOD).

Acquiring Leave Medication

The pharmacy will supply all medications needed for patients leaving the hospital on a leave. No medications are to be given to the patient from Unit supplies.

Prescriptions for patients leaving the hospital should be in the pharmacy before noon of the day prior to the patient's leaving.

Prescriptions are filled in the pharmacy and the properly labeled medications are returned to the Unit. The unit nurse keeps these medications locked in the medication cabinet or cart until the patient's departure time.

The unit nurse is to give the patient the pharmacy prepared medication at the time of the patient's departure. The nurse is to write a progress note indicating the time of departure as well as the teaching that was provided to the patient or their family. Any medications given to the patient which are controlled substances must include in the progress note the name of the medication, the strength and the quantity given.