

<b>State of New York OFFICE OF MENTAL HEALTH</b>  <hr/> <b>OMH OFFICIAL POLICY MANUAL</b>	<b>Date Issued</b> 5/11/87	<b>T. L.</b> 87-08	<b>Section #</b> PC-1050
	<b>Section</b> Patient Care - Family Services		
	<b>Directive</b> Family Support Services		

A. Policy Statement

It is the intention of the Office of Mental Health to ensure that families of patients have a full opportunity to participate as informed and indispensable partners with mental health providers in the treatment and rehabilitation of their family member. Such a partnership enhances the ability of the patient to relate to his/her family in a supportive environment and is an important factor in successfully treating the patient, and returning to and maintaining him or her in the community.

This policy directive focuses on involving families through the provision of education and information about the nature of mental illness and the delivery of mental health services in order to diminish the stress often associated with unfamiliarity with the admission and treatment procedures. An anticipated outcome of providing such education and information is that the participation of families in case-specific treatment planning will be facilitated, provided that the patient agrees to the involvement of his/her family.

Each inpatient and outpatient program operated by a State psychiatric facility shall have a well-defined plan for the provision of orientation programs, educational and informational materials and ongoing support services for the families of patients served by the facility. Each facility director is responsible for ensuring the development, implementation and evaluation of a written plan which is consistent with the needs of families and complies with the requirements of this policy directive. The input of families should be sought in the process of developing the goals of family support services.

Initial implementation of this policy directive shall commence immediately, and full implementation is required within twelve months of its effective date.

B. Relevant Statutes and Standards

N/A

C. Definitions

- 1) Family - Those members of the natural family or household of a patient who regularly interact with the patient and/or are directly affected by or have the capability of affecting the patient's condition.

D. Body of the Directive

This policy directive consists of four components:

- 1) Initial Orientation Program and Written Materials
- 2) Ongoing Family Support Program

- 3) Educational and Informational Resources
- 4) Staff Education and Training
- 1) Initial Orientation Program and Written Materials

Each facility's written plan must provide for the development and implementation of orientation programs and written materials for families of patients served by the facility. At a minimum, the plan must address the following:

- a) A written protocol for the initial contact with the family of the patient by a professional staff member. The protocol will be designed to assess the impact on the family of the patient's admission to an inpatient or outpatient program, to determine the family's needs, and to identify the family's capacity to give emotional support to the patient during the admission and treatment phase, and upon return to the community.
- b) Identification and training of the professional staff members who are most likely to provide the initial contact.
- c) Written materials which include, but are not limited to: a brief summary of the events which typically occur to and on behalf of the patient during the first 72 hours of inpatient admission or the first outpatient visit; the role of the family and the professional staff during the initial phase of treatment; pertinent information related to mental illness; the organization of the facility; facility programs and services, and other State and local programs and services; policies and procedures concerning communications and visits, personal belongings, and personal care articles; names and telephone numbers of key staff and administrators; names of Board of Visitors members; names of Mental Hygiene Legal Service attorneys; hotline numbers; and names, addresses and telephone numbers of self-help groups.
- d) Tours of relevant areas of the facility.
- e) Establishment of regularly scheduled hours when families may make telephone contact or meet with specific staff.

2) Ongoing Family Support Program

Each facility's written plan must provide for an ongoing family support program to serve as a follow-up to the initial orientation program. The focus of ongoing support programs should be to provide educational and informational opportunities for families which foster the philosophy of families as partners in treatment. Such programs should be made available on a regularly scheduled basis and must accommodate work and other schedules of families and be provided in locations accessible to families.

Through meetings with staff, informational sessions or other appropriate forums, the ongoing family support programs must provide educational and informational opportunities which support, at a minimum, the following goals:

- a) To increase the understanding which families have regarding the public mental health system in general, the specific treatment programs and services offered by the facility, medications and other treatment modalities, patients' rights, legal issues, and other relevant aspects of the care, treatment and rehabilitation of

their family member.

- b) To facilitate the involvement of families in the treatment of their family member by providing specific information related to the overall treatment process, the role of the family and staff in treatment and discharge planning, the role and responsibilities of the family in the patient's treatment after discharge, and support services available to families.

3) Educational and Informational Resources

Each facility's written plan must include the development and/or identification of generic and facility-specific educational and informational material for use with and distribution to families as outlined above. It is recommended that the use of various media (e.g. print, film, video) be explored and that existing material be identified for use.

There is an existing body of information that is generic and applicable across the system which will be provided, upon request, to each facility by the Bureau of Family Services, Operations Division, (518) 474-5222. This material includes information related to patients' rights, the Mental Hygiene Legal Service, Board of Visitors, legal issues, family participation in the treatment planning process, and transfer of patients.

4) Staff Education and Training

Each facility must develop educational and training opportunities for staff which foster the philosophy and practice of families as partners in treatment. Such education and training programs must be made available to all levels of staff and must support the following goals:

- a) To increase the sensitivity of staff to the needs of families.
- b) To orient staff to view families as allies in the treatment process.
- c) To enhance staff skills in the area of family education and communications techniques.