
Principles: Enhanced Treatment Programs at State Psychiatric Hospitals

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BACKGROUND

The Department of State Hospitals (DSH) is developing enhanced treatment programs at state psychiatric hospitals. The DSH's purpose in creating the programs is to provide a secure 24-hour living area for the treatment of physically aggressive patients who are at risk of harming others as a result of their behavior. The DSH treatment and services will be provided in a secure area of the facility where controls, such as locked patient rooms, exist to manage patients' behavior until they are stabilized and returned to a less secure unit. The following principles guide Disability Rights California's (DRC's) policy advocacy in this area.

PRINCIPLES

Access to Treatment

1. Consistent with state and federal law, patients who reside in locked state-run facilities have the right to treatment and to receive treatment in the manner that is least restrictive of their personal liberty.
2. Any placement in an enhanced treatment program should not be done absent a safety concern and should not be for the purpose of punishment, coercion, convenience, or retaliation. Rather placement

should be for purpose of increasing access to appropriate treatment and services.

3. Standardized placement criteria should be related to safety concerns. The patient's written treatment plan should justify the reason for placement and the plan should specify the enhanced treatment that will address the specific behavior(s) that caused the placement and identify discharge criteria.
4. Enhanced treatment programs should provide enhanced and adequate therapeutic staffing and consistent access to hospital staff. The programs should have access to an enhanced array of treatment and service options including access to at least the same array of treatment and service options provided to patients who live in other units. The programs should not be used to seclude patients. Rather patients should reside there for only as long as necessary to receive treatment. The goal should be to move patients out of the programs as quickly as possible.
5. Treatment should only use positive behavioral techniques and should never be punitive.
6. The treatment provided should be individually designed, evidence-based, recovery-oriented, and protect basic human rights.
7. The program should meet necessary licensing requirements, including ensuring that staff are appropriately licensed. The licensing category should specify staffing levels, physical environment requirements, treatment requirements and patients' rights. Staff should be screened, go through the required background check, fingerprinting, and alcohol/drug testing.

Admission to and Review of Placement in Enhanced Treatment Program

1. Prior to admission, the patient should receive an assessment by a qualified mental health professional with expertise in behavior management. The assessment should include a review of records, the patient's behavioral needs, interviews with treatment team members and the patient, and a recommended approach to providing appropriate treatment and services.
2. The treatment team, including the patient and a patients' rights advocate, should review the assessment and other relevant information and determine if placement in the enhanced treatment

program is appropriate. Members of the treatment team should have the requisite knowledge and expertise to determine if placement is appropriate.

3. After admission to the program the treatment team, including the patient and patients' rights advocate, should regularly review the need for placement in the enhanced treatment program and the need for additional or different treatment. The patient should have the right to appeal the placement in an enhanced treatment program.

Due Process and Patients' Rights

1. Each enhanced treatment program should have a patients' rights advocate assigned to the unit.
2. Patients in an enhanced treatment program have the same patients' rights as other patients, as specified in 9 CCR section 880 et al. These include: the right to file a patients' rights complaint, contact DRC, speak with their attorney, have access to a law library and the courts, and have access to visitors, access to personal property, access to out of doors, access to telephones and the right to consent to and refuse treatment. Any denial of rights should meet the good cause criteria and rights may not be denied solely because of being in an enhanced treatment program.
3. Any hearing to consider the patient's placement in the enhanced treatment program should afford basic due process rights.
4. Patients retain their right to consent to or refuse medical treatment, including the use of psychotropic medications. The use of psychotropic medications should be governed by the laws generally applicable to all patients and should not be based on placement in the enhanced treatment program.

Reporting, Monitoring and Pilots

1. Enhanced treatment program pilots should provide data collection and reports to legislative policy and budget committees on the effectiveness of the programs.
2. Enhanced treatment programs should be monitored similarly to other programs as described in Welfare and Institutions Code section 4023, which requires notice to DRC of deaths, sexual assault and staff abuse. Monitoring allows for oversight of the programs and a mechanism for identifying and resolving issues.