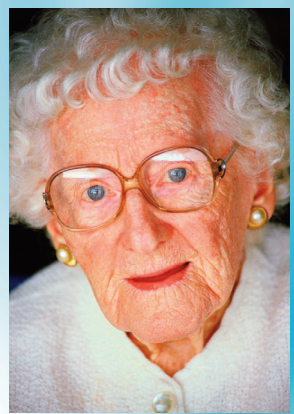


MENTAL HEALTH AND ADDICTIONS PROGRAM

St. Joseph's
Healthcare  Hamilton



Family Handbook

ST. JOSEPH'S HEALTHCARE HAMILTON
MENTAL HEALTH AND ADDICTIONS PROGRAM

May 2011

MENTAL HEALTH AND ADDICTION PROGRAM

Family Information Handbook

Telephone: (905) 522-1155
Website: www.stjoes.ca

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Welcome

Welcome to St. Joseph's Healthcare Hamilton and the Mental Health and Addiction Program.

The Family Handbook has been developed to help introduce you to our program and to the services and supports that we offer. You will find that there is a great deal to learn about how care is provided in the hospital and then continued in the community. The Family Handbook will help to familiarize you with our model of care and our hospital processes. We are deeply committed to providing care that is both client/patient-centred and family-centred. Family members and friends are critically important in helping their loved ones recover from mental illness and addiction. Our goal is to keep you involved and informed so that we can best meet the needs of all of our clients and their families.

Our understanding of how to best to help those affected by mental illness has changed dramatically over the past generation. We have a much greater appreciation of the potential for recovery and of the approaches that can best help to achieve and sustain a return to health. The involvement, understanding and support of family members are extremely important. The Mental Health and Addiction Program at St. Joseph's Healthcare is closely integrated with the Department of Psychiatry and Behavioural Neurosciences at McMaster University. We believe that the environments that will provide the best care to our clients and their families are those that are striving to advance our understanding of mental illness and addictions, and to educating our students in the latest evidenced-based approaches. By achieving excellence in care, research and teaching, we aim to help our clients achieve their fullest level of recovery.

We hope that you find the information in the Family Handbook to be helpful. We are very much looking forward to working with you and your family members.

Dr. Robert B. Zipursky MD FRCP(C)
Vice-President, Mental Health & Addiction Program
St. Joseph's Healthcare Hamilton

Professor and Chair, Department of Psychiatry and Behavioural Neurosciences
Michael G. DeGroote School of Medicine

St. Joseph's Healthcare Hamilton

The Mental Health & Addiction Program

- *St. Joseph's Healthcare Hamilton*
- *Mental Health and Addiction Program*
- *Mental Health and Addiction Program Offered by Service*
- *Compliments, Comments or Concerns*

St. Joseph's Healthcare Hamilton

St. Joseph's Healthcare Hamilton (SJHH) is Catholic owned and operated by the St. Joseph's Health Care System. We provide clinical services across three campuses. Located in downtown Hamilton is our **Charlton Campus**, on the Hamilton escarpment is our **West 5th Campus** and in the city's east end, our **King Campus**. We are one of Canada's leading academic health science centres and we are partners with McMaster University and Mohawk College.

We believe in the importance of mind, body and soul in the healing process. Under the leadership of the Sisters of St. Joseph of Hamilton, our healthcare professionals are dedicated and realize that each person has unique needs and goals. Our delivery of care is personalized to each of our clients and their families.

Teaching Facility

SJHH is a teaching hospital. We welcome students from all healthcare programs. This means your family member may have one or more healthcare professional students involved in his/her care under the direction of the healthcare team.

Research

Many new treatments and changes in healthcare have come from research done here. Your family member may be asked to take part in a research study. If he/she agrees, a consent form must be signed. If your family member does not wish to be in a research study, he/she will still receive quality healthcare.

About the Mental Health and Addiction Program

Our vision is to achieve important advances in the understanding, prevention, treatment and rehabilitation of people with mental illness and addictions and to be recognized for excellence and innovation in service delivery, research and education.

St. Joseph's Healthcare is a leader in providing mental health and addiction care. Our reputation is based on the quality of care provided to our clients, the expertise of our team, the innovative nature of our programs and the pioneering quality of our research.

This is a very exciting time for our Program. There is an increasing expectation and hope that advances in science and new approaches in rehabilitation can reduce the effects of serious mental illness and addictions, and improve the lives of our clients. Our vision is to pioneer innovation so we can radically reduce the effects of the disability associated with mental illness and addiction.

We know that it is common for persons diagnosed with mental illness and those with addictions to experience stigma and barriers to social integration. We are committed to the elimination of stigma and to the promotion of recovery for every person.

The Mental Health and Addiction Program has over 200 inpatient beds and a large outpatient program. We also work closely with many community agencies to help our clients with their recovery.

Mental Health & Addiction Program Offered by Service

Administration Chief of Psychiatry & Integrated Vice President	ext. 36291
Acquired Brain Injury (ABI) Nurse Manager	ext. 35522 ext. 38368
Forensic Service (G-2 & H-2) Head of Service Nurse Manager Intake and Fitness Clinic Coordinator Aggression Clinical Coordinator Transitional Outreach Team Outpt. RN H-2 (Medium Secure) G-2 (Minimum Secure)	ext. 36886 ext. 36699 ext. 36495 ext. 36601 ext. 36813 ext. 35500 ext. 36223
General Psychiatry and Addiction Service Director Admin. Assistant	ext. 36267 ext. 36675
Acute Care (A-2) Nurse Manager	ext. 36400 ext. 35672
Acute Mental Health – 10 Tower Nurse Manager	ext. 33277 ext. 33395
Acute Mental Health – 9 Tower Nurse Manager	ext. 34370 ext. 34388
Community Psychiatry Services (CPS) Nurse Manager Medical Director	ext. 36040 ext. 34388 ext. 33195
Psychiatry Consultation Liaison Service	ext. 35998
Crisis Outreach and Support Team (COAST)	(905) 972-8118
Developmental Dual Diagnosis Program	ext. 36768
East Region Mental Health Services (ERMHS)	ext. 34801
Eating Disorders Program	ext. 33433
Men's Withdrawal Management Service	(905) 527-9264

Outpatient Dialectic Behavioural Therapy (DBT)	
Psychiatric Rehabilitation Program (PRP) Nurse Manager	ext. 36001 ext. 33395
Psychiatry Emergency Service (PES) Nurse Manager Medical Director	ext. 33312 ext. 33395 ext. 34358
Rapid Consult Clinic	ext. 33954
Specialized Assessment & Treatment/Acute Mental Health (G-1) Nurse Manager	ext. 36435 ext. 36771
Womankind Addiction Services Manager	(905) 521-9591 ext.

Geriatric Psychiatry Head of Service Director Nurse Manager Admin. Assistant Brant Geriatric Mental Health Outreach Program Geriatric Mental Health Program Halton Geriatric Mental Health Outreach Program Niagara Geriatric Mental Health Outreach Program	ext. 36202 ext. 36782 ext. 36372 ext. 36727 ext. 36438 519-752-3636 ext. 36396 905-681-8233 905-704-4068
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Mood and Anxiety Services Head of Service Director Nurse Manager Anxiety Treatment and Research Centre (ATRC) Referrals Mood Disorders Program (Inpatient) Referrals Mood Disorders Program (Outpatient) Referrals Women's Health Concerns Clinic	ext. 36372 ext. 36403 ext. 36738 ext. 36035 ext. 33697 ext. 34344 ext. 36649 ext. 35419 ext. 36236 ext. 33979
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Peer Support Services Coordinator Mental Health and Wellness Resource Centre	ext. 36446 ext. 35406
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Peer Support Council	ext. 35599
Peer Support Providers	ext. 36600

Schizophrenia and Community Integration Service

Schizophrenia Administration	
Director	ext. 36632
Head of Service	ext. 35428
Nurse Manager	ext. 35402
Admin. Assistant	ext. 36266
Brant Assertive Community Treatment Team	(519) 752-2927
Centralized Rehabilitation:	ext. 36407
Manager	ext. 36624
Inspiration Place	(905) 522-4506
Recreation	ext. 35566
Tobacco Addiction Recovery Program (TARP)	ext. 36677
Vocational Assessment	ext. 36383
Vocational Counselling	ext. 36618
Cleghorn Program	ext. 36586
Manager	ext. 32942
Community Schizophrenia Service (CSS)	(905) 527-8515
Outpatient Manager	ext. 234
Community Treatment Order (CTO)	
Coordinator	ext. 36321
Haldimand-Norfolk Assertive Community Treatment Team	(519) 587-5331
Hamilton Assertive Community Treatment Team (HARTS)	(905) 525-4273
Hamilton Assertive Community Treatment Team 2	(905) 528-5354
Homes for Special Care	ext. 36328
Manager	ext. 36441
Schizophrenia B-2	ext. 36200
Schizophrenia C-2	ext. 36421
Schizophrenia D-2	ext. 36294

Other Services	
Health Information Services Manager	ext. 35505
Psychiatric Patient Advocate Office Patient Advocate	ext. 35514
Risk Management/Patient Relations Manager	ext. 37310
Volunteer Services Coordinator	ext. 35561

Compliments, Comments or Concerns

If you have a concern we invite you to talk to the healthcare provider involved or any other member of the healthcare team with whom you feel the most comfortable. Our goal is to resolve your concerns as soon as we can. If you still have concerns after speaking to members of the healthcare team, we invite you to speak to the Unit Nurse Manager, Director or Medical Head of Service.

In addition, you may also call the Peer Support Services (ext. 36446), Patient Advocate (ext. 35514) or Patient Relations (ext. 33838). If no one is available, you are welcome to leave a message with your name and contact information at (905) 522-1155, ext. 33838.

Our Beliefs

- *Recovery*
- *The Role of the Family in Recovery*
- *Words We Use*
- *Privacy and Confidentiality: Sharing Personal Health Information (PHI)*
- *West 5th Campus Ethics Committee*
- *STOP[®] First*
- *Rights and Responsibilities*
- *Prevention of Violence*

Our Beliefs

Recovery

We believe in the concept of Recovery. Research has shown that people can and do recover from mental illness.

Dr. Patricia Deegan, an international expert on recovery, was diagnosed at age seventeen with schizophrenia. Today she is a “voice” for people with mental illness. Dr. Deegan reminds us that:

- *Recovery does not mean cure.*
- *Recovery is an attitude and a way to approach the challenges of each day.*
- *Recovery does not happen in a straight line. There are times when you may feel you are gaining and progressing and times when you feel down and disappointed. This is all part of recovery.*
- *Each person’s journey of recovery is unique.*
- *Each person must find what works for him or her.*

Dr. William Anthony describes recovery as:

*“a deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills and/or roles. It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness”*¹

Many things affect recovery such as:

- support from relationships such as family, friends, healthcare professionals and others
- hope
- education and knowledge
- self-help
- empowerment
- spirituality
- living environment
- employment and meaningful activities
- financial resources

¹ Anthony, W.A. (1993). Recovery from mental illness: The guiding vision of the mental health service system in the 1990’s, *Psychiatric Rehabilitation Journal*, 16(4), 11-23

The Role of the Family in Recovery

We know that family members have special knowledge and expertise when it comes to the care and support of a family member with mental illness and addiction. With the client's permission, members of the healthcare team will involve family in the Interdisciplinary Plan of Care (IPC). They will also give you information and support your needs and your role in your family member's recovery process.

Good communication and relationship building with the client and his/her family can be an important factor in a successful recovery.

Here are some helpful hints to promote recovery:

- Be positive and encouraging. Remember that people can and do recover.
- Learn about the illness, treatment options and services available. This helps you take an active part in your family member's recovery process.
- Be supportive and understanding even though you may disagree with your family member's goals.
- Share information about your family member's history with a member of the healthcare team when asked to do so.
- Help develop the plan of care when asked.
- Take an active role in planning your family member's discharge when asked.
- Look after yourself and stay healthy.
- You may want to contact our Mental Health and Wellness Resource Centre at ext. 35406 to obtain information about the role of the family in recovery. They can also help you find information on how to find support in your community.

Words We Use

We want everyone to feel welcome and cared for by our staff. We make sure that we use words that promote health, wellness, and recovery. We do not use words like "crazy", "schizophrenic" or "addict". Words like these are negative.

Using the right words helps people see themselves in positive ways. It helps people take control of their lives, make healthy decisions and learn to live with their illness or make healthy changes.

We would also like you to think about the words you use. Here are some guidelines that we follow at SJHH:

Words to Use	Never Use
Person with a mental illness	Crazy, insane, mental patient
Person with schizophrenia	Schizophrenic
Person with a diagnosis of a developmental disability	Mentally retarded
People with a diagnosis of a disability/mental illness	The disabled or mentally ill
Living with	Normal or abnormal
Diagnosed with	Suffering from; Victim of
Person with an alcohol addiction	Alcoholic
Person with a drug addiction	Addict, junkie, crackhead

Privacy and Confidentiality: Sharing Personal Health Information (PHI)

It is important to maintain the privacy and confidentiality of personal health information for all clients. Each client's health record may contain information that the client does not want shared with anyone except the members of the healthcare team.

At SJHH, we treat all personal health information as confidential. This is important to the wellbeing of our clients and shows our values of treating clients with dignity and respect.

Each person has the right to say when his or her health information can and cannot be shared. Therefore there may be times when your family member may not want you involved or have information shared with you. This may occur at any time during his/her inpatient or outpatient care.

Before any personal health information can be shared, the client must be informed and give consent. This is described in the Mental Health Act (MHA) and the Personal Health Information Protection Act (PHIPA).

PHIPA tells us when a person's health information can and cannot be shared. These laws are strict and we follow them at SJHH. To read more about the law, see Appendix D.

As a member of the family, there may be times when your family member may not want you to see or know about his or her personal health information. This may cause you to have feelings of frustration, anger, isolation or hurt. It is important to discuss your concerns or feelings with a member of the healthcare team. Resources and support are also available from the Mental Health and Wellness Resource Centre and community partners.

West 5th Campus Ethics Committee

The Ethics Committee at the West 5th Campus provides a forum where situations that have significant moral or ethical dimensions can be examined. Examples of ethical issues include:

- inadequate informed consent
- a capable person's wishes not followed or a Substitute Decision Maker appointed when patient is capable
- breach of patient confidentiality
- conflict about appropriate treatment among health care providers, client's family
- restriction of freedom (i.e., use of seclusion, restraint)
- not being told the truth
- coercive use of power
- conflict of interest (i.e.: relationship boundary violations between people)
- unsafe conditions, and access to, or availability of needed resources

Consultation may be provided for case consultation, policy formulation and revision, identification of educational needs and provision of education and resources.

For Information contact the Ethics Committee Chairperson at ext. 36365.

STOP® First

The Canadian Mental Health Association reminds us all to **STOP®** and **THINK** about what we say. Before saying something, ask yourself does this word or phrase:

Stereotype a person with mental illness or addiction? Does it put all people into one group instead of thinking of each person as an individual?

Trivialize or make a person with mental illness or addiction feel small or not important as a person?

Offend a person with mental illness or addiction by insulting him or her?

Patronize a person with mental illness or addiction by treating this person as if he or she is not as good as another person?

Always remember that many people live with mental illness and addictions. This includes family members, friends, co-workers, professionals, leaders and Nobel and Pulitzer Prize winners. *(STOP® 1993 Canadian Mental Health Association)*

Rights and Responsibilities

SJHH recognizes and supports the values and dignity of each individual and the sacredness of human life. We believe that rights and responsibilities are very important in establishing a relationship of mutual respect and understanding. Every person is expected to respect the rights of other clients, visitors, family members, staff, physicians, volunteers, students and the hospital.

Prevention of Violence

We expect everyone to treat one another with dignity and respect always. Aggressive behaviour and/or violence are unacceptable practices at SJHH. We are committed to and strive for the prevention of violence in the workplace and will take every precaution reasonable to provide a healthy, safe, secure and violence-free workplace environment for all employees, patients/clients, visitors, members of the professional staff, volunteers, learners, and contractors.

The Care That We Provide

- *Client-Centered Care*
- *Building a Therapeutic Relationship*
- *Interdisciplinary Plan of Care (IPC)*
- *Health Promotion and Education*
- *Mental Health & Addiction Professionals*
- *Crisis*
- *Seclusion and Restraint*
- *Time Away from the Unit or Out of the Hospital*
- *Passes off the Unit*
- *Community Treatment Order*
- *Ontario Review Board (ORB)*

The Care That We Provide

Client-Centred Care

We believe in client-centred care. This means that the needs and goals of each person are important and are at the centre of the individual's plan of care. We work closely with clients and families in the outpatient programs, during hospital stays and after discharge to help identify and work towards achieving personal goals.

Each member of the healthcare team has special knowledge and skills to help clients make informed choices. We also promote respect and support clients' and families' values, strengths, priorities and recovery.

Building a Therapeutic Relationship

A therapeutic relationship is a process that occurs between the client and the members of the healthcare team. The goal is to develop trust, respect and empathy in the relationship. The relationship has to be real or genuine in order to reach the goals of the client and healthcare team.

Interdisciplinary Plan of Care (IPC)

The word interdisciplinary means you, your family member and the members of the healthcare team are working together to develop a plan of care. This plan is started on admission and includes developing treatment and life goals and plans as well as discharge planning. The team and the client evaluate the plan of care regularly.

Health Promotion and Education

Health promotion and education are important. The care team will provide your family member with information and education about the diagnosis, plan of care, treatment, healthy lifestyle and other things to help promote his/her recovery.

Mental Health & Addiction Professionals

Members of the healthcare team are professionals with special training. They work together to help the client identify and reach his or her goals. Some examples of members of the team are doctors, nurses, occupational therapists, dietitians, music therapists, pharmacists, physiotherapists, psychologists, recreation therapists, social workers, speech and language pathologists, spiritual counselors, addictions counselors and vocational counselors.

Crisis

A crisis is a state of emotional distress that may be caused by many things. During a crisis, a person may not be able to think or act clearly. A person in crisis may have trouble seeking help or coping with the problem in usual, healthy ways.

When a person with a mental illness is in crisis, he/she may have thoughts of suicide or harming him/herself or others. The person may have irrational or bizarre thoughts and behaviours.

Members of the healthcare team use a client-centred approach in a crisis. The team helps the individual based on his/her rights, past experiences, values, beliefs and wishes. With the client's consent, the family is involved in the plan and can help to make decisions.

The team also helps clients and families learn how to prevent a crisis in the future and how to get help quickly during a crisis.

Seclusion and Restraint

On admission, the care team will ask the patient about how he or she copes with stress. They will help the patient develop a plan that promotes your participation, safety and recovery. If you or your family has information that may be helpful, please talk to your care team.

We are committed to reducing and eliminating the use of restraint and seclusion (locked room). Your team will work with the patient to prevent restraint or seclusion.

In an emergency with risk of harm to self or others, restraint or seclusion may be used. Restraint or seclusion will be used in the safest way possible. The patient will be asked questions about their experience afterwards. This is called debriefing. The team will review and revise the plan of care with the patient. The team may review and update it with the family if appropriate.

If you have any questions or concerns, please talk to a Nurse Manager or Director.

Time Away from the Unit or Out of the Hospital

Part of an individual's recovery involves having time away or "a pass" from the unit and/or hospital in order to meet his/her own treatment and rehabilitation goals. Members of the healthcare team and the client decide together when this will happen. The team always considers the health, wellbeing and safety of the client.

Passes off the unit

Passes can vary from “grounds” to “off-grounds” passes. The client may be allowed to go with an assigned person or may be allowed to go on his or her own for some passes.

Passes out of the hospital

There are many kinds of passes to leave the hospital. The client may be allowed to leave on his/her own or with an assigned person. The client may leave for a few hours or a full weekend. The client and members of the team arrange the amount of time away in advance.

The pharmacist, nurse or counselor prepares the medications for the client to take while on the pass. All medications are checked by a nurse and then reviewed with the client and/or the family member before going out on a pass.

The team may also meet with the client and family to talk about a plan for the pass prior to the client going on the pass and afterwards to discuss what happened during the pass.

Community Treatment Order

Community Treatment Order (CTO) is an option for treating some clients in the community rather than in the hospital. The CTO provides a person with a serious mental illness with a complete plan for community-based treatment, care and supervision that are less restrictive than hospitalization. A CTO lasts for six months and can be renewed providing the client still meets certain criteria.

For more information about Community Treatment Orders, see Appendix B or contact the CTO Coordinator at (905) 522-1155 ext. 36321.

Ontario Review Board (ORB)

The Criminal Code of Canada Part XXI requires each province and territory to establish a Review Board that has jurisdiction over individuals who have been found by a court to be either Unfit to Stand Trial or Not Criminally Responsible (NCR) as a result of a mental illness. In the Province of Ontario, the Ontario Review Board (ORB) serves as an independent tribunal responsible for overseeing the accused individuals. Monitoring activities include the holding of annual ORB Hearings to make and review dispositions. These Hearings are typically held at the hospital where the client is detained and are open to members of the public.

For more information about the ORB and its hearings, contact (905) 522-1155 ext. 36262.

While You Are Visiting

- *Visiting*
- *Safety*
- *Accessibility for Ontarians with Disabilities*
- *Smoke-Free Environment*
- *Alcohol and Illegal Drugs*
- *Cell Phones and Recording Equipment*
- *Latex Balloons*
- *Scent Sensitivity*

While You Are Here

Visiting

Relationships are an important part of people's lives and of recovery. Visits from family members are important to people when they are in the hospital. We welcome and encourage you to visit your family member.

Visiting hours vary from unit to unit and campus to campus. We suggest that you call ahead or speak to a member of the healthcare team for information on the unit that you want to visit. Some units may only allow two visitors at a time. Some units do not allow visiting in the client's room.

Here are some general visiting guidelines:

- Do not visit if you have an infection, cold, sore throat, diarrhea, vomiting or are not feeling well.
- Arrange visits for times that do not conflict with your family member's appointments or his/her plan of care.
- Check with the nurse before bringing in any food, drink, candy, personal belongings, electronic equipment, etc.
- Contact the unit charge nurse if you plan to visit with a child under the age of 12.
- Walk and speak quietly so as not to disturb other clients.

For information on parking at all sites, please see Appendix G.

Safety

Ensuring your family member's safety is an important part of quality of care. Please consider the following precautions when visiting the hospital:

- Please encourage your family member to wear their **Hospital Identification Bracelet at all times**. If the bracelet comes off, the nurse can be asked to provide a new one.
- Expect healthcare workers to introduce themselves and look for their identification badges.
- If you have questions or don't understand something please ask.
- Please wash your hands or use the antibacterial lotion when entering and leaving any of the inpatient units.

- We invite you to ask our staff, volunteers and learners if they have washed their hands prior to providing care to your loved one.
- If you have a cold, respiratory symptoms or other contagious illness please do not visit.
- When visiting, please point out to staff any spills or obstructions on the floor.

Accessibility for Ontarians with Disabilities

- Improving accessibility for persons with disabilities to SJHH's facilities, programs and services
- The participation of persons with disabilities in the development and review of its annual accessibility plans and
- Providing quality services to all staff, patients and their family members, and to members of the community with disabilities

In support of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) St. Joseph's Healthcare will:

1. Develop a series of Policies, Practices and Procedures to meet the requirements of the Customer Service Standard
2. Train all staff, volunteers, contractors, and any other people to support our AODA program
3. Make available all of our policies, practices and procedures in a format that takes into account the person's disability.
4. Establish a process for people to provide feedback on how we provide goods and service to people with disabilities.

Smoke-Free Environment

SJHH provides a smoke-free environment. This means that no one can smoking in any building or on the property.

We know that being in a smoke-free hospital may be hard for patients and visitors if you currently use tobacco products. We also know that a patient may or may not want to quit using them.

We have many ways to help any person thinking about quitting smoking. Quit smoking programs, Nicotine Replacement Therapy and personal support from the care team is available.

For more information, please talk to a member of the healthcare team.

Consultation for individuals on inpatient units is available with a Tobacco Treatment Specialist at ext. 36677.

Alcohol and Illegal Drugs

Our goal is to provide a place that is free of alcohol and illegal drugs. Alcohol and illegal drugs have bad effects on people's safety. They also interfere with treatment and recovery.

Cell Phones and Recording Equipment

Cell phones and recording equipment are not permitted out of respect for people's privacy,

Latex Balloons

Some people are allergic to latex. Balloons made from latex are not permitted. Mylar balloons are allowed.

Scent Sensitivity

Some people are allergic to scents. Please do not wear scented lotions, sprays, perfumes, etc.

Services & Resources

- *Peer Support Services*
- *Family Education and Training Program for Schizophrenia*
- *Psychiatric Patient Advocate Office*
- *Spiritual Care*
- *Labyrinth*
- *Volunteer Resources*
- *Agencies and Organizations to Help Family and Friends*
- *Access to Legal Services*
- *Cultural Interpreters*

Services & Resources

Peer Support Services

Peer Support Services is made up of programs staffed by individuals who have lived the experience of mental illness. The service includes the Mental Health and Wellness Centre, Peer Support Council and Peer Support Providers.

All programs provide services to both inpatients and outpatients. The Mental Health and Wellness Resource Centre also provide service to family members.

Mental Health and Wellness Resource Centre

The Mental Health and Wellness Resource Centre provide people in recovery, their families and community members with easy access to reliable mental health and related information.

The Resource Centre provides support and resource material to help you find information and make decisions about mental health issues.

The Centre provides information in many ways including print, video, DVD, audio and the Internet.

Staff and volunteers can help you look for information. We can also help you use a computer or any other equipment.

Resource Centre staff can also provide information and support to self-help groups as well as offer educational workshops and film viewing. The centre can be made available to small groups, upon request, for educational purposes.

Location: West 5th Campus, Room F-146 off of cafeteria

Hours: Monday: 9:00 a.m. to 2:30 p.m.
Wednesday to Friday: 9:00 a.m. to 5:00 p.m.
Other evening and weekend hours are available. Call to ask.
You can also call to arrange multi-language information.

Peer Support Council

As a member of the Ontario Association of Patient Councils, our mission is to:

- Make sure that all people with mental illness get the best quality of life and care in the hospital, clinics and community.
- Gather information about mental illness issues in the hospital, clinics and

community.

- Present issues to the healthcare organization's administration, community agencies or services and advocate for positive change.
- Work closely with the Ontario Association of Patients Councils in lobbying and advocating locally and provincially.
- Provide information and education about choices, self-advocacy, peer support and political awareness.
- Develop and provide education and awareness on all aspects of living with a mental illness to mental health professionals, staff and members of the community through various forums.
- Make sure that consumer feedback is real and honest.
- Promote and role model recovery as defined by consumers.

Peer Support Providers

Trained Peer Support Providers draw on their expertise as individuals having experienced serious mental illness. They are able to share their personal experience of recovery to offer supports to clients, including one-to-one support, general advocacy, facilitation of self-help/mutual aid groups, role-modeling, problem solving and information sharing.

Contact information:

Peer Support Services Coordinator: ext. 36446

Mental Health and Wellness Resource Centre: ext. 35406

Peer Support Providers: ext. 36600

Peer Support Council: ext. 35599

Family Education Program for Schizophrenia and Other Psychotic Disorders

The Family Education Program (FEP) provides families with information about the causation, course and treatment of schizophrenia, problem-solving techniques, crisis and communication skills, and connections with community resources. The program, involves an orientation session, twelve-week of group sessions, individual family counseling during the group and a booster session following the group. The group is facilitated by mental health clinicians and family volunteers and welcomes referrals from the St. Joseph's catchment area including self referrals from families.

This program is supported by Schizophrenia and Community Integration Services with participation from other community partners and family volunteers. For more information, please contact the FEP Coordinator at (905) 522-1155 ext. 36624.

Psychiatric Patient Advocate Office

The Psychiatric Patient Advocate Office (PPAO) is part of the Ontario Ministry of Health. It was set up to protect the civil and legal rights of psychiatric patients in Ontario hospitals. The Hamilton office is located at the West 5th Campus but functions separate from SJHH.

The PPAO promotes patient's rights in Ontario by giving any person with mental illness rights advice, advocacy and education. Their goal is to improve the quality of care and life of all people with mental illness.

For more information, contact the local office at (905) 388-2454. It is open Monday to Friday, 8:30 a.m. to 4:30 p.m. or visit their website at www.ppao.gov.on.ca.

Spiritual Care

The Spiritual Care department provides spiritual and emotional support for clients and families as well as the team during times of crisis and loss. The spiritual well-being of all clients is important to us no matter what you believe or practice. We can arrange for you to talk to a member of our Spiritual Care department or your own faith group.

For inpatients, the Spiritual Care department has information about the spiritual needs of many faiths. A member of the department can help you find ways to practice your beliefs while you are here.

For more information, please see Appendix F.

Labyrinth

A labyrinth is a spiraling pathway marked on the ground. You “walk” the pattern by following the single path to the centre and back out again. As you follow the path, you slow down, focus your attention inward and often feel a sense of relaxation and connection.

Everyone is invited to use the labyrinth at SJHH. It is located:

- in the Marian Wing courtyard at the Charlton Campus

The labyrinth offers those who use it:

- a purposeful distraction while waiting,
- a meditative “leg stretch”,
- a place to let one's thoughts wander in a relaxed way,
- a place to spend some time “processing” changes or bad news,

- a place to help with coping with illness or moving through a healing process

Anyone may use the labyrinth as part of his or her personal healing. Walking the path may help you cope with an illness or a life change, or deal with a loss. Some use labyrinths as part of insight-oriented psychological healing from such challenges as grief, trauma, addictions, depression and anxiety.

For more information:

- Contact Spiritual Care at the Charlton Campus (905) 522-1155 ext. 33263
- Website: www.stjoes.ca

Volunteer Resources

Client Leisure Library

The Client Library provides a comfortable environment for leisure reading, listening to music and relaxing.

- Call: (905) 522-1155 ext. 36736
- Open: Daily from 9:30 a.m. to 11:30 a.m. and 1:30 p.m. to 3:30 p.m.

There is also a mobile library cart that contains books, magazines and video rentals for inpatients.

The GEAR Store

This is a used clothing store. For a very small charge, clients can purchase clothing and accessories.

- Call: (905) 522-1155 ext. 36855
- Open: Wednesdays from 1:30 p.m. to 3:30 p.m.

Volunteers manage all retail aspects of the store including cash and displays. Inpatients and outpatients can volunteer to work at SJHH for experience.

Coffee Shop and Tuck Cart

Clients who are part of the Supported Employment Initiative, volunteers and the Volunteer Association staff offer the sale of gifts, coffee and snacks.

Take a Break Coffee Shop is open:

- Monday to Thursday from 8:00 a.m. to 7:00 p.m.
- Friday from 8:00 a.m. to 3:30 p.m.

- Saturday 9:00 a.m. to 4:00 p.m.
- All profits are donated to the Patient Comfort Fund.

Hairtastic Salon

The hair salon services are available for a fee to individuals staying on inpatient units at the West 5th Campus. Services include shampoo, cut, style, beard trimming and colouring. Appointments can be made by calling the salon at extension 36282. If you require assistance making an appointment please speak to the unit staff.

- The salon is located at the West 5th Campus in rm. C130
- For an appointment call ext. 36282
- Hours of operation are Tuesday, Wednesday and Thursday and, on alternate weeks, Wednesday and Thursday, 8:30 a.m. to 4:30 p.m.

Agencies and Organizations to Help Family and Friends

The Family Mental Health Support Network of Hamilton and Halton provide information and networking support to families and friends of people who are challenged by mental illness.

Our mission is to:

- inform family members and friends about support groups and community resources,
- help develop support groups in Hamilton and Halton,
- help support groups connect to one another.

Other services include:

- a staffed telephone information line with an after hours voicemail,
- a quarterly newsletter called *The Networker* which is full of information about public education seminars and articles on the latest research and trends in the mental health.

For more information, please contact the Family Mental Health Support Network of Hamilton and Halton at (905) 777-9921.

The following are agencies and organizations listed by region:

Hamilton

- Alcohol Drugs and Gambling Services
(905) 546-3606 (for treatment)
(905) 546-3162 (for information and resources)
- Canadian Mental Health Association/Hamilton
Telephone: (905) 521-0090
Website: www.cmhahamilton.on.ca
- Crisis Outreach and Support Team (COAST)
Telephone: (905) 972-8338
Website: www.coasthamilton.ca
- Family Mental Health Support Network for Hamilton and Halton
Telephone: (905) 777-9921
- Mood Menders Support Group
Telephone: (905) 521-0090, ext. 234
Website: www.moodmenders.ca
- Schizophrenia Society of Ontario/Hamilton
Telephone: (905) 523-7413
Website: www.schizophrenia.on.ca

Halton

- Canadian Mental Health Association, Halton
Telephone: (905) 693-4270
Website: www.cmha-halton.ca
- Equilibrium Support Group
Telephone: (905) 693-4270
Website: www.cmha-halton.ca
- Family Mental Health Support Network for Hamilton and Halton
Telephone: 1-888-688-7777
- Schizophrenia Society of Ontario, Halton
Telephone: (905) 876-1647
Website: www.schizophrenia.on.ca

Niagara

- Canadian Mental Health Association

Telephone: (905) 641-5222
Website: www.cmhaniagara.ca

- Depressive and Manic Depressive Support Group of Niagara
Telephone: (905) 687-6897
- Family Mental Health Support Network for Niagara
Telephone: (905) 684-0073
Website: www.familysupport.niagara.com
- Niagara Health System Community Crisis Care Welland
Telephone: (905) 732-6111
Website: www.niagarahealth.on.ca
- Schizophrenia Society of Ontario St. Catharines
Telephone: (905) 684-2081
Website: www.schizophrenia.on.ca

Brant

- Brant Community Mental Health Centre
Telephone: (519) 751-5530
Website: www.bchsys.org
- Brant Mental Health Crisis Response System
Telephone (519) 752-2273
Website: www.bchsys.org
- Canadian Mental Health Association Brant
Telephone: (519) 752-2998
Website: www.cmhabrant.on.ca
- Depression/Manic Depression Support Group
Telephone: (519) 752-2998
Website: www.cmhabrant.on.ca
- Schizophrenia Society of Ontario Brant
Telephone: (905) 523-7413
Website: www.schizophrenia.on.ca

Haldimand

- Adult Mental Health Services
Telephone: (877) 244-3094

Website: www.hnmentalhealth.com

- Canadian Mental Health Association
Telephone: (519) 426-8211
Website: www.hnmentalhealth.com/cmha.htm
- Crisis Assessment and Support Team (CAST)
Telephone: (866) 487-2278
Website: www.hnmentalhealth.com
- Depression/Manic Depression Support Group
Telephone: (519) 426-8211
Website: www.hnmentalhealth.com/cmha.htm
- Schizophrenia Society of Ontario Haldimand Region
Telephone: (905) 523-7413
Website: www.schizophrenia.on.ca

For more information on these and other community mental health services, contact:

Family Mental Health Support Network for Hamilton and Halton
Telephone: (905) 777-9921 or 1-888-688-7777
Hours: Monday to Friday from 12:30 p.m. to 4:30 p.m.

Access to Legal Services

www.lsuc.on.ca/public/a/finding/
www.legalaid.on.ca/en/locate/default.asp
www.lawyerlocate.ca/
www.lawyershop.ca/regions/ontario/ontario-lawyers.php

Cultural Interpreters

If English is not your primary language, ask a member of your care team for the assistance of a cultural interpreter. If you are deaf or hearing-impaired, ask a member of the healthcare team to arrange for an interpreter.

Appendices

The next section contains more information on relevant laws and programs/services referred to in this handbook. If you require more information on the actual laws, please contact the Mental Health and Wellness Resource Centre at ext. 35406.

If you have questions, please don't hesitate to talk to any member of the healthcare team.

- Appendix A Personal Health Information
- Appendix B Community Treatment Orders (CTO)
- Appendix C Psychiatric Patient Advocate Office (PPAO)
- Appendix D Legislation
- Appendix E Consent and Capacity Board
- Appendix F Spiritual Care
- Appendix G Parking and Transit
- Appendix H Volunteering at St. Joseph's Healthcare Hamilton
- Appendix I Please Tell Us What You Think

Appendix A

Personal Health Information

Statement of information practices

Your request for healthcare services implies that you consent to the collection, use and disclosure of your personal health information for specific related purposes. We will only use or disclose your personal health information with your consent except where a particular use or disclosure is permitted by law without your consent.

How SJHH collects personal health information about you:

We collect personal health information directly either from you or from the person acting on your behalf. The personal health information that we collect may include: your name, date of birth, address, health history, records of your visits to SJHH and the care that you received during those visits.

Occasionally, we collect personal health information about you from other sources if we have obtained your consent to do so or if the law permits.

How SJHH uses and discloses personal health information about you:

We use and disclose your personal health information to:

- Treat and care for you,
- Get payment for your treatment and care from OHIP, WSIB, your private insurer or others,
- Plan, administer and manage our internal operations,
- Conduct risk management and quality improvement activities,
- Compile statistics,
- Fundraise to improve our healthcare services and programs,
- Conduct research and client satisfaction surveys,
- Teach,
- Notify a representative of a religious affiliation to visit you during your stay,
- Confirm you are a client, your health status, and your room and telephone number while in hospital.

Requesting access to your record

You may obtain access or request correction of your record by contacting the Release of Information Specialist in the Health Records Department of SJHH by calling (905) 522-1155 ext. 33417, Monday through Friday from 8:00 a.m. to 4:00 p.m.

Protecting your personal health information

We take steps to protect your personal health information from theft, loss and unauthorized access, copying, modification, use, disclosure and disposal. We conduct audits and complete investigations to monitor and manage our privacy compliance. We take steps to ensure that everyone who performs services for us protects your privacy and only uses your personal health information for the purposes you have consented.

Who to contact for more information or concerns:

Chief Privacy Officer

St. Joseph's Healthcare Hamilton
50 Charlton Avenue East
Hamilton, Ontario
L8N 4A8
Call: (905) 522-1155 ext. 35088
Fax: (905) 521-6140
Email: privacy@stjoes.ca

Privacy Commissioner of Ontario

2 Bloor Street East, Suite 1400
Toronto, Ontario
M4W 1A8
Call: (416) 326-3333 or 1-800-387-3333
Fax: (416) 325-9195
Email: commissioner@ipic.on.ca

Appendix B

Community Treatment Orders (CTO)

A doctor can issue a CTO when the client meets specific criteria including:

- The person must have been in a psychiatric facility two or more times or for a cumulative period of 30 days or more in the previous three years or have been on a previous CTO. A Community Treatment Plan (CTP) has been developed in consultation with those named in the CTP.
- The doctor must also examine the person 72 hours prior to entering into the CTO and be of the opinion that:
 - (i) the person is suffering from a mental disorder and needs treatment or care and continuing supervision while living in the community
 - (ii) if the person is not in a psychiatric facility, he/she meets the criteria for a Form 1 – Application for Psychiatric Assessment
 - (iii) if the person does not receive continuing treatment or care and supervision in the community, the person is likely to cause serious bodily harm to self or others; or suffer substantial mental or physical deterioration or serious physical impairment;
 - (iv) the person is able to comply with the plan
 - (v) the treatment or care and supervision are available in the community.

The doctor must have consulted with the health practitioners and others named in the Community Treatment Plan (CTP), must be satisfied that the person or the Substitute Decision Maker (SDM) has consulted with a rights advisor and when consent has been obtained from the individual or SDM.

Community Treatment Plan (CTP)

This is developed before a CTO is issued with all those party to the CTP. Each person named in the plan will have a role to play in provision of care and these responsibilities are defined during the development of the plan. A CTP might include such things as:

- regularly scheduled meetings with the doctor,
- regularly scheduled meetings with the case manager,
- assistance with medication and treatment,
- attending group therapy, skills training or other community groups.

How can families be involved?

- Your role may be as the Substitute Decision Maker for treatment if your relative is incapable to make treatment decisions as defined under the Health Care Consent Act, 1996,
- If your relative is in agreement you can attend CTP meetings,
- If you feel that a CTO would be of benefit, speak to the doctor, nurse or
- social worker.

For more information, call the CTO Coordinator at (905) 522-1155 ext. 36321.

Appendix C

Psychiatric Patient Advocate Office (PPAO)

Mission

The PPAO provides independent and confidential advocacy services and rights advice to consumers of and those seeking access to psychiatric services. We work to empower our clients to make informed decisions about their care, treatment, and legal rights. We use information, education, negotiation, and referral to conduct instructed, non-instructed, and systemic advocacy. We conduct public education on these issues. We promote self-advocacy and self-determination.

Vision

The vision of the PPAO is that persons with mental illness in Ontario be treated with dignity and respect, that their legislated rights and entitlements be upheld at all times, and that they are actively involved in decisions affecting their life, care, and treatment.

Mandate

- To advance the legal and civil rights of patients by means of both individual casework and systemic advocacy.
- To inform the patient, family, hospital staff, and the community about patients' legal and civil rights.
- To assist, facilitate (self-advocacy), and help resolve the complaints made by psychiatric patients by providing an avenue for resolution through negotiation according to the patient's instructions.
- To investigate alleged incidents and to assess institutional and systemic responses to these instances.
- To refer patients, when necessary, to outside community advocacy resources such as community organizations, lawyers, or doctors who may offer a second opinion.

Values

In providing services to its clients, the PPAO is guided by the following values:

People: We believe in the autonomy of all people and in each person's right to make informed choices. We value all people as members of our communities and recognize that we may need a variety of formal and informal supports and services in our lives.

Education: We believe education is a powerful tool to effect social change and that this is a part of advocacy.

Community: We believe that with sufficient community options and supports, most mental health consumers are able to remain in their home community if this is their choice.

Process: We believe that the advocate's first responsibility is to act upon the client's expressed wishes and personal choices, and to promote the safety, quality of life and care of clients who cannot instruct an advocate.

Independence: We believe that we must be maximally free from actual, potential, or perceived conflicts of interest in order to serve our clients more effectively.

Consumer Participation: We believe that it is essential for consumers, to the extent that they want to and are able to, participate and have the sense of ownership in the policy development of the PPAO.

Principles of Advocacy:

- Client directed
- Independent
- Accessible
- Use avenues of least contest to resolve issues

For more information, contact the local office at (905) 388-2454.

Appendix D

Legislation (This is a summary only not the actual Acts)

Mental Health Act

The Mental Health Act is a provincial law that gives healthcare professionals and psychiatric facilities specific rules, forms and guidelines to follow when caring for people who require assessment, treatment and hospitalization for a mental disorder.

Form 1 – Application by Doctor for Psychiatric Assessment

Form 42 – Notice to Patient

After a doctor personally examines someone and feels that he or she meets the criteria to be detained for a psychiatric assessment, the doctor may fill out a Form 1. A Form 1 allows a psychiatric facility to complete an assessment for a period of up to 72 hours.

When the person is at the psychiatric facility, a doctor must give a written notice called Form 42 – Notice to Patient. This explains the reason for the assessment.

Before the 72-hour assessment period is over, a decision must be made to release the person, admit the person as a voluntary patient or admit the person as an involuntary patient.

When the decision is made to admit the person as an involuntary patient, a Form 3 – Certificate of Involuntary Admission is needed.

The law requires that there must be a second opinion. A second doctor must examine the person and confirm that the person needs an involuntary admission to a psychiatric facility. This second doctor will fill out a Form 3 – Certificate of Involuntary Admission. If this doctor feels a Form 3 is not needed, the person may either be admitted to the hospital, with his or her consent, as a voluntary patient, or released.

Form 2 – Order for Examination under Section 16

Anyone, under oath, may ask a Justice of the Peace to issue a Form 2 – Order for Examination. This allows the police to apprehend and bring a person to a doctor for examination (usually done at the hospital emergency department). The purpose of the examination is for the doctor to decide if a Form 1 assessment is needed. If a Form 1 is not issued, then the patient may be admitted, with his or her consent,

as a voluntary patient or released.

Form 3 – Certificate of Involuntary Admission, Form 4 – Certificate of Renewal and Form 30 – Notice to Patient

An involuntary patient in a psychiatric facility means that the patient cannot leave the hospital without discussion with his or her doctor.

After the doctor has examined the patient and decides that the patient meets specific criteria under the Mental Health Act, a Form 3 – Certificate of Involuntary Admission and a Form 30 – Notice to Patient will be issued and the Form 30 is given to the patient. This form explains the reason for the involuntary admission.

A Rights Advisor then meets with the patient. The Rights Advisor is from the Psychiatric Patient Advocate Office (see Appendix C). This Advisor explains the forms and tells the patient that he or she can request a Consent and Capacity Board Hearing if he or she disagrees with the involuntary finding. The Consent and Capacity Board (see Appendix E) is made up of people who are independent of the hospital. They hear the case and decide if the patient should remain an involuntary patient or not.

A Form 3 runs out in two weeks. Before this happens, the doctor may extend the certificate by filling out a **Form 4 – Certificate of Renewal** and another Form 30. The first time a Form 4 is signed, the expiry period is one month. If a Form 4 is signed a second time it lasts two months. After that, any time a Form 4 is filled out for the same person it lasts three months.

Each time a Form 4 is renewed, a Form 30 is issued and given to the patient and the Rights Advisor meets with the patient. After every fourth renewal, an automatic hearing by the Consent and Capacity Board occurs.

Form 5 – Change to Informal or Voluntary Status

A voluntary patient means that the person has agreed to stay in hospital and does not meet the legal requirements for an involuntary admission. A patient must always be informed that he or she is a voluntary patient. At any time during a voluntary admission, if the doctor feels that the legal requirements for involuntary admission are applicable, a Form 3 may be issued to start the involuntary process.

At any time during an involuntary admission, if the patient no longer meets the criteria to be detained as an involuntary patient, the doctor may fill out a Form 5 – Change to Voluntary Status. When this is done, the patient must be informed that he or she has been changed to a voluntary patient.

Form 21 – Certificate of Incapacity to Manage One’s Property and

Form 33 – Notice to Patient

When a person is admitted to a psychiatric facility, a doctor must examine the person to decide if he or she is able to look after his or her finances and property. The attending doctor may also conduct an assessment at any other time during the course of that admission.

When the doctor decides that the patient is not able to manage his or her finances, the doctor will fill out a Form 21 – Certificate of Incapacity to Manage One’s Property. This will allow the Public Guardian and Trustee to become the patient’s Statutory Guardian for property. A Statutory Guardian will handle all financial issues and has the same authority as the patient would normally have (except creating a will). The patient must be given a Form 33 – Notice to Patient. A Rights Advisor will visit the patient and provide assistance should they wish to challenge the finding of incapacity before the Consent and Capacity Board. The patient has the right to challenge this once in any six-month period.

Form 23 – Notice of Cancellation of Certificate of Incapacity

Should a doctor decide after examination, that the patient is now capable to manage his or her own finances and property, the doctor will issue a Form 23 - Notice of Cancellation of Certificate of Incapacity. The doctor will inform the patient and notify the Public Guardian and Trustee immediately.

Form 24 – Notice of Continuance of Certificate of Incapacity & Form 33 –

Notice to Patient

Within 21 days **before** discharge, the doctor must reassess the financially incapable patient and decide if he or she is still incapable of managing his or her own finances. If so, Form 24 – Notice of Continuance of Certificate of Incapacity and a Form 33 – Notice to Patient is issued. Once again, the patient is given Form 33, rights advice is necessary and a Consent and Capacity Board Hearing may be requested. If a Notice of Continuance is signed before discharge, the Statutory Guardianship continues indefinitely after the patient is discharged.

Health Care Consent Act

Incapable to Make Treatment Decisions

Every person is presumed to be capable of consenting to treatment unless the healthcare professional, using specific criteria, determines that they are not capable to consent to treatment. A person is capable of making decisions about a

treatment if they are able to understand the information relevant to making a decision about the treatment and able to appreciate the consequences of making or not making that decision about a proposed treatment. In Ontario, the Health Care Consent Act was created to ensure that specific rules were in place for all types of treatment decisions and applies to treatment for patients who are both inside and outside of the hospital.

With the exception of certain emergency situations, any proposed treatment requires informed, capable, voluntary consent. Capable people are entitled to make their own treatment decisions. A person that has been deemed incapable to consent to that treatment requires this decision to be made on his or her behalf by a Substitute Decision Maker (the person who is authorized under the Health Care Consent Act to give or refuse treatment consent on behalf of the patient). Every time a health practitioner proposes treatment, the patient must be assessed and a decision made if the patient is capable to give consent for that treatment. A patient may be capable to consent for one form of treatment but be incapable to consent to another.

When a psychiatric inpatient is deemed to be incapable of consenting to treatment for a mental disorder, he/she is given an explanation by the health practitioner, given a Form 33 – Notice to Patient, and a Rights Advisor is notified to explain the significance and to provide assistance if the patient wishes to have it reviewed by the Consent and Capacity Board.

If a patient is in the community or the proposed treatment is of a medical nature, the health practitioner that is proposing the treatment must inform the patient that they are mentally incapable to make this decision. Since there is no rights advisor and no Form 33 for this, the health practitioner must also explain the significance of this finding, notify them that they have the right to challenge this finding with the Consent and Capacity Board, and provide assistance should they wish to.

For additional information on any of the above topics, please go to the following websites:

- Ministry of Health and Long-Term Care: www.health.gov.on.ca
- Mental Health Act:
www.e-laws.gov.on.ca/DBLaws/Statutes/English/90m07_e.htm
- Health Care Consent Act:
www.e-laws.gov.on.ca/DBLaws/Statutes/English/96h02_e.htm
- Substitute Decisions Act:
www.e-laws.gov.on.ca/DBLaws/Statutes/English/92s30_e.htm
- Consent and Capacity Board: www.ccboard.on.ca
- Psychiatric Patient Advocate Office: www.ppao.gov.on.ca

Appendix E

Consent and Capacity Board

What is the Consent and Capacity Board?

The Consent and Capacity Board is an independent body created by the provincial government of Ontario. It conducts hearings under the Mental Health Act, the Health Care Consent Act, the Personal Health Information Protection Act (in force since November 1, 2004) and the Substitute Decisions Act. Board members are psychiatrists, lawyers or members of the general public. The Board sits with one, three, or five members. Hearings are usually recorded in case a transcript is required.

What matters may come before the Board?

The board has authority to hold hearings to deal with the following matters:

Health Care Consent Act

- Review of capacity to consent to a treatment, admission to a care facility or a personal assistance service.
- Consideration of the appointment of a representative to make decisions for an incapable person with respect to treatment, admission to a care facility or a personal assistance service.
- Consideration of a request to amend or terminate the appointment of a representative.
- Review of a decision to admit an incapable person to a hospital, psychiatric facility, nursing home or home for the aged for the purpose of treatment.
- Consideration of a request from a Substitute Decision Maker for directions regarding wishes.
- Consideration of a request from a Substitute Decision Maker for authority to depart from prior capable wishes.
- Review of a Substitute Decision Maker's compliance with the rules for substitute decision making.

Mental Health Act

- Review of involuntary status (civil committal).
- Review of a Community Treatment Order.
- Review as to whether a young person (aged 12 to 15) requires observation, care and treatment in a psychiatric facility.
- Review of a finding of incapacity to manage property.

Personal Health Information Protection Act

- Review of a finding of incapacity to consent to the collection, use or disclosure of personal health information.
- Consideration of the appointment of a representative for a person incapable to consent to the collection, use or disclosure of personal health information.
- Review of a Substitute Decision Maker's compliance with the rules for substitute decision-making.

Substitute Decisions Act

- Review of statutory guardianship for property.

How are applications made to the Board?

Application forms may be available from health or residential facilities. Completed applications should be faxed to the Board's regional office. Health practitioners and officials of health and residential facilities are expected to fax forms to the Board within one hour of completion. If necessary, call 1-800-461-2036 for application forms, specific information sheets and contact information for the Board.

When and where will the hearing be?

The parties will receive a notice from the Board with the time and place of the hearing. If you are not a party, you may ask the Board for the time and place. The hearing will usually take place within a week after the Board receives the application and will be held in the facility where the person who is the subject of the hearing resides or receives treatment or at some other place convenient to the parties.

How much does it cost?

There is no charge to the participants for the services of the Board. The Board is publicly funded and requests that all participants assist in keeping costs down.

What will happen at the hearing?

Each party may attend the hearing and invite anyone they want to come. Family members and friends are also encouraged to attend. The presiding member will introduce everyone and explain how the hearing will work, who the official parties are and the order in which people will speak.

Each party may have a lawyer, call witnesses and bring documents.

Each party and the Board members may ask questions of each witness.

At the end of the hearing, each party will be invited to summarize and the presiding member will then end the hearing.

What happens after the hearing?

The Board will meet in private to make its decision. The Board will issue its decision within one day. The Board may also issue written reasons explaining its decision. Written reasons will be issued if any of the parties request them. This request must be made within thirty days of the hearing.

Can the Board's decision be appealed?

Any of the parties may appeal the Board's decision to the Superior Court of Justice.

How can I get more information?

For information sheets, application forms and detailed contact information for the regional and head offices of the Board call 1-800-461-2036.

Note: Different rules apply to a hearing held to decide if a person is to be denied access to his or her own records in a psychiatric facility.

Appendix F

Spiritual Care

Charlton Campus

- Chaplains: (905) 522-1155 ext 33253
- Secretary: (905) 522-1155 ext 33263

West 5th Campus

- Chaplain: (905) 522-1155 ext. 35510

King Campus

- Chaplain: (905) 522-1155 ext. 38078

You can ask to talk to a chaplain when you need support, spiritual guidance or advice. Members of the department represent many faiths. We are also able to contact faith leaders in the community or other resource people to help meet your needs. Chaplains are in the hospital Monday to Friday from 9:00 a.m. to 5:00 p.m.

Charlton Campus

On-call Chaplain or Priest

There is always a chaplain on-call after hours and weekends for emergencies. An on-call priest can be contacted through the Spiritual Care department or the on-call chaplain.

Communion

Communion is available to Roman Catholic patients every day except on Saturdays.

Chapel

The Chapel is located at the main entrance and is always open for prayer and meditation. Roman Catholic Chapel Services are held on Sundays at 9:00 a.m. and Monday to Friday at 11:45 a.m.

Spirituality Group

A Spirituality group is offered on Acute Psychiatry Program, Level 10 in the Juravinski Innovation Tower (Charlton Campus) every second Friday. It is also part of the programming at the Womankind Addiction Service.

Memorial Services

There is a memorial service held every two months for patients who have died while in hospital.

Spiritual Garden

Located in the front of the hospital, this garden is a beautiful, peaceful place to visit anytime and is a smoke-free area.

Support and Counseling

Inpatients and outpatients can arrange to talk to or visit the chaplain.

Worship Services and Spirituality Groups

The department also provides worship services and spirituality groups on some units.

West 5th Campus**Communion**

If you are Roman Catholic and would like communion on a Sunday morning, call ext. 35510 before Friday at 5:00 p.m.

Chapel

The Chapel is open Monday through Friday from 12:30 p.m. to 1:00 p.m. with a member of the Spiritual Care department present. At any other time, patients and family members may visit the Chapel with a member of the healthcare team.

Chapel Services:

- Sunday - Ecumenical Service at 9:00 a.m.
- Thursday - Roman Catholic Mass at 6:00 p.m.
- Wednesday - Meditation Group at 12:30 p.m.

All are welcome to attend.

Memorial Services

Individual memorial services and spiritual support can be arranged with the chaplain following the death of someone from the mental health community.

Bereavement Support Groups

Twelve-week bereavement support groups may be held in the Chapel when the need arises.

Bereavement Support and Counseling

The Chaplain offers bereavement support and counseling to anyone who has had a loss.

Appendix G

Parking and Transit

Charlton Campus

Visitor Parking Ramp:

- Enter off James Street South
- ½ hr. or less - \$2.50 or daily maximum of \$15.00

Roof Deck Pay and Display:

- Enter at St. Joseph's Drive
- ½ hr. or less - \$2.50 or daily maximum of \$15.00

You must pay in advance at a machine and put the ticket on the dashboard.

Short Term Lot:

- Enter off Charlton Street East
- ½ hr or less - \$3.00 or daily maximum of \$20.00

Parking Permits:

- Some family members of patients who are in the hospital for longer than five days may be able to get a parking pass at lower prices.

For more information on parking at this campus, please contact the Parking Office at 905-522-1155 ext. 32750.

West 5th Campus

Pay and Display Visitor Parking (two locations):

- Visitor only parking at the main entrance off West 5th Street
- J Wing parking lot near the playing field

Parking is \$1.50 an hour and \$10.00 a day. You must pay in advance at a machine and put the ticket on the dashboard.

Meter Parking:

- Limited meter parking can be found in front of Grove Hall
- These machines accept only correct change

For more information on parking at the West 5th Campus, please contact the Parking Office at (905) 522-1155 ext. 32750 or 36304.

King Campus

Front Lot – Automated Gate:

- This lot is located in the front of the building on the east side
- Enter off King Street East
- You go through an automatic gate and pay when you exit
- You must have \$5.00 in correct change to exit

Front Lot – Meter Parking:

- This lot is located in the front of building on the west side
- This is for short visits only
- You need to have small, correct change to use meters

Rear Lot – Meter Parking:

- This is for short visits to Urgent Care or Diagnostic Services

For more information on parking at the King Campus, contact the Facilities Manager at (905) 522-1155 ext. 34807.

*Please note that parking rates/locations may change without notice.

Bus Routes and Taxis

- For HSR buses, call (905) 528-4200 for prices, bus routes and times
- For Yellow Taxi, call (905) 522-3535
- For Blue Line Taxi, call (905) 525-2583

Appendix H

Volunteering at St. Joseph's Healthcare Hamilton

Volunteers are very active at SJHH. The Volunteer Association's goals are to provide services for patients and visitors, as well as to recruit new volunteers. Here are some of the services volunteers provide:

Program and Recreation Assistants

These volunteers provide support and encouragement to clients attending programs and activities. They help staff in client-centered activities.

Community Visitors

Community visitors help outpatients with getting back into the community. Their role is often critical in assisting outpatients upon discharge from the hospital.

Spiritual Visitors

Spiritual visitation is done by specially trained volunteers who provide guidance to clients when they request spiritual support. This may include accompanying clients to pastoral services at various sites.

Friendly Visitors

Inhospital friendly visitors provide friendly conversation and social interaction.

Music and Entertainment

Musical entertainers provide entertainment to clients on different programs in the hospital.

Fundraisers

Fundraising efforts are successful through the dedication of volunteers selling tickets and other items to raise funds for client comfort items.

Museum

The Museum is dedicated to preserving the history of the Hamilton Psychiatric Hospital. Museum volunteers manage the historical photographs, artifacts and museum pieces. They set up displays and conduct educational tours to the general public. Tours can be arranged by calling Volunteer Resources at (905) 522-1155 ext. 35561.

Share and Care Program

Volunteers give out donated personal care items to people who are in need of this service. If you would like to make a donation, please contact the Volunteer Resources Coordinator at (905) 522-1155 ext. 35561 for more information.

Become a Volunteer

If you would like to be a volunteer, you can get an application from the website: www.stjoes.ca.

You can also contact Volunteer Resources at each of the hospital campuses:

Charlton Campus

Director of Volunteer Resources (905) 522-1155 ext. 33993

Administrative Assistant (905) 522-1155 ext. 33464

Coordinator (905) 522-1155 ext. 33464

King Campus

Administrative Assistant (905) 522-1155 ext. 38162

Coordinator (905) 522-1155 ext. 38162

West 5th Campus

Coordinator (905) 522-1155 ext. 35561

Appendix I

PLEASE TELL US WHAT YOU THINK

After reading **The Family Information Handbook**, please respond to the following statements. Your answers and comments will help us improve the information.

Circle one number for each statement	Strongly Disagree				Strongly Agree
The words are easy to read Comments:	1	2	3	4	5
The information is easy to understand Comments:	1	2	3	4	5
This information was helpful Comments:	1	2	3	4	5
The information helped me to better understand, know... Comments:	1	2	3	4	5
The information answered my questions List any other questions you have:	1	2	3	4	5

I would recommend this information to others (patients, people with...)	1	2	3	4	5
Comments:					

I would have preferred more information about:

I would have preferred less information about:

Other comments and suggestions:

THANK YOU! Please return this form to:
Room F115
St. Joseph's Healthcare Hamilton, West 5th Campus
100 West 5th Street, Hamilton, Ontario L8N 3K7

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[illegible]

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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