

103 CMR 424.00: PHASE TREATMENT PROGRAM

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424.01: Purpose

The purpose of 103 CMR 424.00 is to establish rules regarding patients at Bridgewater State Hospital who are identified by clinical staff as needing a more highly structured clinical program. The Phase Treatment Program is designed to help patients improve behaviors, gain internal controls and advance to less restrictive housing units while protecting the safety of patients and staff.

424.02: Statutory Authorization

103 CMR 424.00 is issued pursuant to M.G.L. c. 124, § 1(q). 103 CMR 424.00 is not intended to confer any procedural or substantive rights not otherwise granted by state or federal law, nor any private cause of action.

424.03: Cancellation

103 CMR 424.00 cancels all previous Department policy statements, bulletins, directives, orders, notices, rules or regulations regarding the Phase Treatment Program.

424.04: Applicability

103 CMR 424.00 shall be applicable to all staff and patients at Bridgewater State Hospital.

424.05: Access to Regulations

103 CMR 424.00 shall be maintained within the central policy file of the Department, the Bridgewater State Hospital policy file and patient law library, and shall be accessible to all Department employees.

424.06: Definitions

Business Day - Monday through Friday, excluding holidays.

Business Hours - Mondays through Fridays, 9:00 A.M. to 5:00 P.M., excluding holidays.

Commissioner - The Commissioner of Correction.

Medical Director - The Medical Director of Bridgewater State Hospital.

Phase Treatment Program - A progressively structured clinical privilege program designed to facilitate treatment objectives by assigning patients to one of four phase program status designations based on the individual patient's behavioral characteristics and treatment needs. There are four phase levels: Special Treatment Status, Phase I, Phase II and Phase III.

Special Treatment Status Housing Areas - Areas designated by the Superintendent to house patients placed on Special Treatment Status (STS). Normally, patients assigned to Special Treatment Status shall be housed in a designated area of the maximum security units.

Superintendent - The chief administrative officer at Bridgewater State Hospital.

Treatment Team - A multi-disciplinary unit based team charged with developing treatment plans and delivering services to patients.

Unit Director - The staff person responsible for clinical management and treatment planning of patients assigned to a particular unit.

424.07: Assignment of Patients to the Phase Treatment Program

(1) Patients may be placed or retained on the Phase Treatment Program if, by their behavior, they are unable to be housed safely, and participate in treatment, with the general population, and if they do not require emergency interventions such as seclusion or restraint.

(2)(a) Patients may be assigned to Special Treatment Status by a staff psychiatrist, based on a clinical assessment, and in collaboration with the Treatment Team whenever possible.

(b) Patients may be placed on Phases I, II, or III by any clinician, based on a clinical assessment, and in collaboration with the treatment team whenever possible.

(c) During non-business hours, a patient may be temporarily placed on Phase I status by the officer in charge of the unit, pending a clinical evaluation, if the patient is engaging in behavior which, if left unaddressed, could lead to the patient posing a threat to self, others, or the security of the institution. Such a clinical evaluation shall be conducted the next business day.

(3) The psychiatrist or clinician placing the patient on the Phase Treatment Program will:

(a) Explain the reasons for such placement to the patient; and

(b) Describe to the patient the behaviors necessary for advancement to a higher level.

(4) The Treatment Team will modify the Master Treatment Plan, in collaboration with the patient. This will include:

(a) Identifying skills necessary for the patient to move to a less restrictive level;

(b) Formulating and providing interventions to assist the patient in attaining those skills;

- (c) Assessing the effectiveness of the interventions;
- (d) Revising the Treatment Plan as indicated.

(5) All patients placed on the Phase Treatment Program will have their status reviewed by the Treatment Team on a daily basis during business hours, and shall be advanced to a less restrictive status as soon as clinically indicated.

(6) All assignments to Special Treatment Status shall be reviewed by the Medical Director or his/her designee on the next business day.

(7) Patients on Special Treatment Status and Phases I and II will participate in the on-unit rehabilitation treatment program to the fullest possible extent.

424.08: Continuing Evaluation of Special Treatment Status Patients

(1) The Unit Director, or the unit director's designee, of the unit in which the patient is currently housed shall have a clinical contact with each patient on Special Treatment Status at least once daily.

(2) During the daily clinical contact, the patient shall be evaluated and any clinical needs shall be addressed as the clinician deems appropriate.

(3) The Treatment Team shall provide the Medical Director with a written assessment of each patient on Special Treatment Status weekly, or at a more frequent interval, if appropriate. This assessment shall contain a recommendation concerning whether the patient should remain on Special Treatment Status. The Medical Director may, in the exercise of his/her professional judgment, accept or reject the recommendation.

424.09: Operation of the Phase Treatment Program

(1) The Superintendent and Medical Director shall develop procedures for the operation of, and privilege restrictions in, the phase treatment program. These procedures shall include, at a minimum, the following:

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(a) Clothing: Phase Treatment Program patients shall wear patient clothing.

(b) Personal Hygiene: Phase Treatment Program patients will be offered the opportunity to shower and shave daily. Patients on Special Treatment Status shall be escorted to and from showers while handcuffed. Only one Special Treatment Status patient shall be showered at a time. STS patients shall be entitled to one haircut per month in the barber shop.

(c) Meals: STS patients will be fed in their rooms. Except for those patients on dysphagia status, all STS patients shall receive the same meals as patients in the general population. All other Phase Treatment Program patients shall eat in the chow hall.

(d) Patient Movement: STS patients shall be handcuffed and escorted when removed from the STS corridor in the Maximum unit. All restraints shall be removed when the patient reaches the other location and again when the patient is returned to the Special Treatment Corridor. STS patients shall be strip searched, at the discretion of the unit sergeant or designee, upon their removal from, and upon their return to, the STS corridor in the Maximum unit. STS patients in the Maximum Unit shall not have access to patients who are not on that status. Phase I patients, while generally restricted to the corridor on the unit will be allowed out of corridor without mechanical restraint under direct correction officer supervision, as directed by the Treatment Team.

(e) Exercise: STS patients will be offered the opportunity to go to outdoor recreation up to one hour on a daily basis regardless of weather. Time involved in other activities such as showers or telephone shall not be deducted from this period. All other Phase Treatment Program patients shall be allowed to exercise in the gym.

(f) Telephone Calls: STS patients will be offered two 30 minute phone period each week, not including attorney calls. An STS patient must notify the Unit Sergeant that he wishes to make a phone call. All other Phase Treatment Program patients shall have the same telephone privileges as other patients.

(g) Law Library: All Phase Treatment Program patients will have access to the law library at least five hours per week and will be permitted to utilize books, paper, pencil and the typewriter.

(h) General Library: STS and Phase I patients shall not visit the general library. STS patients will be authorized to retain two paperback books, provided by the Librarian, in their rooms at one time. Phase I patients shall be allowed access to additional reading materials. A list of available books will be provided by the Librarian. All other Phase Treatment Program patients shall have the same general library privileges as other patients.

(i) Canteen Privileges: STS patients shall have canteen access for basic hygiene supplies, stamps, paper and envelopes only. Pencils will be provided by mental health workers, and returned after use. All other Phase Treatment Program patients shall have the same canteen privileges as other patients.

(j) Visits: STS patients may have one visit per week of one hour duration with an immediate family member. Visits will be permitted on a prescheduled basis in the Visiting Room, subject to the approval of the Deputy Superintendent. Attorney visits for STS patients are not subject to this time limitation or pre-approval requirement. Phase I patients may have visitors unless contraindicated by the Treatment Team. All other Phase Treatment Program patients shall have the same general visiting privileges as other patients.

(k) Chaplain Visits: Upon request, a regularly scheduled time for the Chaplain to visit an STS patient will be arranged. The Chaplain shall also conduct weekly visits in all units where STS patients are housed. All other Phase Treatment Program patients shall have the same access to the Chaplain as other patients.

(l) Mail: All Phase Treatment Program patients shall be provided the same opportunities for writing and receipt of letters as is available to other patients.

(m) Medical Services: All Phase Treatment Program patients shall receive the same medical services as other patients.

424.10: Time Limits

All time limits set forth in 103 CMR 424.00 are directory.

424.11: Emergency

If the Commissioner determines that an emergency exists, the Commissioner may temporarily suspend part or all of 103 CMR 424.00.

424.12: Review Date

103 CMR 424.00 shall be scheduled for review annually from the effective date by the Commissioner or his designee. The party or parties conducting the review should develop a memorandum to the Commissioner with a copy to the Central Policy File indicating revisions, additions, or deletions.

424.13: Severability Clause

If any article, section, subsection, sentence, clause or phrase of 103 CMR 424.00 is, for any reason, held by a court of competent jurisdiction to be unconstitutional, contrary to statute, in excess of the authority of the Commissioner or otherwise inoperative, such decision shall not affect the validity of any other article, section, subsection, sentence, clause or phrase of 103 CMR 424.00.

REGULATORY AUTHORITY

103 CMR 424.00: M.G.L. c. 124, § 1(q).