

RIVERVIEW PSYCHIATRIC RECOVERY CENTER

FUNCTIONAL AREA: Ethics, Rights and Responsibilities

POLICY No: RI.2.130.4

TOPIC: Contraband & Building Search

AUTHORIZATION:

Clinical Director

Risk Manager

Superintendent

- I. **PURPOSE:** To enhance safety by identifying and preventing dangerous items (contraband) from entering into the therapeutic environment.
- II. **POLICY:** Riverview Psychiatric Recovery Center recognizes that patients have a right to (1) privacy, dignity, and to be free from unnecessary searches; and (2) retain and use personal property. However, patients, staff, and visitors also have the right to a safe and therapeutic environment, which under certain circumstances necessitates taking steps to ensure patients are not in possession of items that may present a hazard to personal safety or the therapeutic environment. In order to maintain a safe and therapeutic environment, as well as privacy of other patients, RPRC may place limits on items coming into the facility. When the situation warrants, searches of patients and their living areas are permitted in order to ensure safety.
- III. **DEFINITIONS/PROCEDURES:**
 - a. **“Contraband”** is a term used to describe prohibited or unauthorized items. Certain items are clearly considered contraband in the hospital environment. These include weapons, illegal or unauthorized drugs, intoxicants, flammable items and items with a sharp edge. Other items such as a torn sheet or clothing, electrical cords, silverware, wire, etc., may be considered contraband if staff believe the item may be used by a patient to harm themselves or someone else, or if an item poses a safety risk or interferes with the rights of others. Additionally, excessive amounts of any authorized item, or personal items whose ownership cannot be determined, may also be considered contraband. The following is a list of such items (representative examples in parentheses—not intended as an exhaustive list) that are considered contraband that shall not be exempted/authorized by Physician Order unless provisions to do so exist in another RPRC policy:
 - **Weapons** (firearms, knives, clubs)
 - **Tobacco and Tobacco-related Products** (cigarettes, cigars, loose tobacco, chewing tobacco, rolling papers, pipes)
 - **Explosives** (black powder, fireworks)
 - **Toxic Substances** (alcohol-based products, nail polish and remover, aerosol cans, household chemicals, paints, perfume, cologne, model glue)
 - **Alcohol** (alcoholic beverages, alcohol-based products; mouthwash, perfume, aftershave, cologne)
 - **Flammable substances** (lighter fluid, lighters, matches, fuel, paint thinner, flints)

- **Unidentifiable substances** (vials, powders, pills, liquids)
 - **Sharp objects** (scissors, nail clippers, knives, needles/pins, razor blades, awl, ice-pick, exact-o blade, hat pins, pencil/makeup sharpeners)
 - **Hanging Risks** (ropes, electrical wires and cords not connected to a device, scarves, nylons, or nylon knee highs , string/rope/cord longer than 8 inches)
 - **Metal cans and lids** (soda can, potato chip can lid, pull tabs, snuff can lid)
 - **Personal defense chemicals** (mace, pepper spray)
 - **Illegal substances/items** (street drugs)
 - **Medications** (non-controlled substances, over-the-counter, personal medications)
 - **Patient-owned electronics with internet access** (cell phones, PDAs, pagers, Kindles, personal computers, or similar devices). See IV below for additional parameters.
 - **Personal Cameras** (film, digital & video cameras, camera phones)
 - **Personal Recording Devices** (cassette or micro-cassette recorders, some cell phones)
 - **Personal communication devices** (cell phones, pagers, blackberries)
 - **Glass items** (bottles, jars, fish tanks, keepsakes; mirrors—*except small compacts may be allowed on some units under direct supervision*)
 - **Office supplies associated with danger risk** (metal spiral notebooks, metal paper clips, letter openers, spring clips, tape dispensers, staplers)
 - **Jewelry associated with danger risk** (long chains or necklaces, large rings, large buckles)
 - **Clothing associated with danger risk** (with tied waist band or cuffs, large belt buckles, steel-toed or heavy boots, nylons, scarves, items with long straps)
 - **Personal Grooming items associated with danger risk** (coloring agent, hair removal products/chemicals, metal files, sharp hair accessories, nail polish and remover)
 - **High potency caffeinated products** (products such as “Red Bull”,” energy drinks”, or similar high potency caffeine containing liquids or powders). This does not refer to coffee, tea, or regular soft drinks.
 - **All pornographic materials** except for Playboy, Playgirl or Penthouse magazines. These may be allowed unless clinically contraindicated. They must not be displayed or shared.
- b. “Monitored items” refers to a specific contraband item that is commonly utilized in daily living and may be allowed in moderation dependent upon safeness associated with the individual’s use. These items will not be allowed into the facility without prior authorization by the PSD, RNIV or NOD. All items are monitored by staff and kept in a safe place on the unit when not in use. Excessive amounts of any monitored item will not be permitted. These items include:
- razors/nail clippers/scissors
 - small make-up compact
 - hair dryer
 - safety pens (on SCU only)
 - special work / activity related items(steel toe boots, guitar)
 - detachable cords for approved electronic devices
 - personal Hygiene Items such as shampoo, soap, toothbrush, toothpaste, deodorant, hairspray, combs, hairbrushes, nail polish and non-toxic hair dye to be used only by RPRC hairdresser after treatment team approval.

- Safety razors and safety toothbrushes are to be used on Lower Kennebec. Patients on this unit with permission may use electric razors.
 - Safety pens are to be used on all four units.
- c. Equipment used in Rehab. Services such as sewing machines, knitting needles, scissors, and garden tools will be used with patients in group or individual activities. This equipment will be monitored by the staff leading the activity.
- d. Highlighters must be purchased by the patient after approval by the OT, education or the psychologist.
- e. Food Items: Food brought in by visitors and by patients may be allowed with the following restrictions:
- Items must be in factory sealed wrappers and containers.
 - Containers must be consistent with policy and therefore cannot be in metal or glass containers.
 - Amount must fit in one plastic grocery size bag.
 - Patients are limited to one RPRC approved grocery-size bag per week. They can only bring back food that is unsealed i.e. fresh fruit /vegetables if the shopping trip was done under staff supervision. Unsealed food, or food requiring refrigeration or freezing, must be consumed by 11pm of the day of the shopping trip.
 - Families may only bring in food items on special occasions which are Thanksgiving, Christmas, Birthday and Easter.
 - Patient may purchase caffeinated beverages for themselves while on community trips as long as it is not medically contraindicated.
 - The Treatment Team may approve food related to spiritual/religious practices.
- f. All food brought in will be inspected by RPRC security and the unit staff prior to a patient receiving it. Staff inspecting the food items will be authorized to prohibit it coming onto the unit and given to patient if the item looks as if it has been tampered with or the seal is broken. Food ordered from and delivered by a local vender will only be allowed with approval of the unit and after inspection by security. Unsealed food from local vendors will not be allowed to be brought in to patients by family or visitors.
- Ordering out only happens once a week with unit or guest, but not both.
 - The patients on the unit decide which 2 restaurants to order from that day.
 - They can only order enough food for that meal.
 - The food that is not consumed must be discarded no later than 11 pm that same day.
- f. Any item ordered by the patient (by phone or on line), will have prior approval by the unit Nurse IV/designee or PSD and inspected in the patient's presence by the unit staff for contraband prior to distribution to the patient. If the item ordered did not receive prior approval for purchase, and it is delivered to RPRC, the unit can authorize that the item be sent back to the sender as "undeliverable."
- g. **"Screenings"** All patient related items are to be screened at the main entrance by security prior to bringing into the facility. As used in this policy screening are the routine actions designed to identify contraband or potentially dangerous items (a) upon patient admission or return to the facility, and (b) visitors entering the facility. Screenings are conducted as a reasonable action to ensure that contraband is not in or brought in the facility by patients, staff or visitors.

- h. **“Searches”** As used in this policy, searches are actions taken by hospital staff when
 - (a) there is a reasonable belief that contraband may be present on a person or in an area that could endanger the health or safety of patients, staff or visitors,
 - (b) in routine safety rounds of units, or
 - (c) at anytime there is a reasonable belief that there is an **imminent threat**.
- i. **“Imminent threat”** as used in this policy describes an immediate threat to personal safety created by reasonable suspicion or direct observation that a patient possesses contraband that could be used to harm himself/herself or someone else.

IV. PATIENT USE AND OWNERSHIP OF ELECTRONIC DEVICES: Patients must have a signed Personal Electronic Device Use Agreement on file prior to use of any electronic device.

1. Televisions: All treatment units will have community televisions available for general patient use during prescribed daily hours. In addition patients on all 4 units may attain the privilege of having and using a television in their own rooms if all the following conditions are met: maintain a level 4 for 30 days and at all times TV is authorized; be actively engaged in prescribed therapeutic programs; be willing to utilize TV watching only at prescribed unit times (generally not to conflict with active treatment hours); and only use hospital- approved and installed televisions and agree to be responsible for the costs of purchase and maintenance. No DVD or similar type players may be used in individual patient rooms. Patients may not possess or directly use any DVDs or DVD devices on the community televisions (staff must choose, possess, and activate the DVD and device). If a treatment team does not approve the use of a private television for any patient otherwise meeting the minimum standards as set forth above, then the team needs to consult the Clinical Director and Director of Nursing to explain the rationale.
2. X-box, Wii, and similar video game devices: Patients must be pre-approved by their treatment teams to have their own personal gaming devices. These devices may not have internet capability. Any devices that have internet capabilities will need to be sent home or inventoried and put into storage until the patient is discharged. Patients must use these devices in public areas of the unit. Patients may not possess or utilize these devices except under indirect staff supervision. Individual patients may privately purchase such devices and accompanying games, but they must be placed in secure unit storage by the staff when not in use. Games must be rated “T” or below. The patient assumes all liability for damage or loss of privately owned devices. Patients may not possess handheld devices such as Playstation PSP game systems as there is no way to secure the CD-type games while the system is in use. Other handheld video games devices that do not have CD-type games can be used in patient rooms during non active treatment hours.
3. Personal and Notebook Computers (including Kindles or similar devices, “smart phones”, any device with internet access, and computer accessories/peripherals such as flash drives, external hard drives, etc.): Only patients who are currently and actively involved in formal educational pursuits such as college courses, GED prep, high school diploma, adult educational programs, or educational remediation may use their own personal computing devices. Patients will need to put in a level request and the treatment team and the RPRC patient educator or occupational therapist will review and approve/disapprove the need for the patient to have their own personal computing device. Any approved device will be stored in a secure area of the treatment mall and can only be used during supervised study hall times in the Harbor Mall area or during education/remediation time with educator or OT. Patients may access the internet as it relates to their educational pursuits under the direct

supervision of approved RPRC staff. Patients are not to upload any visual or audio materials that are protected by copyright laws on their computing devices. Memory sticks/cards and external hard drives are no longer allowed at RPRC and are considered contraband.

4. MP3 players or similar devices: Patients may only have RPRC approved cordless headset-type MP3 players. MP3 players can not have the ability to download videos or pictures. The music for the MP3 players will be downloaded by staff from the RPRC external hard drive that contains a variety of music. If patients purchase their own MP3 players, they may keep the music on the device after discharge for their own personal use. Patients may use their own or hospital owned MP3 players while off the unit at the gym or outside the building. They are to be carried, not worn from the unit to the gym or outside the building. They are not to be used at the Café, Treatment Mall or in the hallways.
5. Stereo Equipment: patients will not be permitted to own or possess individual stereo equipment in their rooms or otherwise. Units may allow supervised use of hospital-owned stereo equipment in public spaces of the ward. Patients may not own or possess CDs or cassettes. Use of these items and stocking of unit CDs will be supervised by unit staff and/or TR staff.
6. Cell phones: patients may not possess cell phones nor ever keep them in their rooms. In rare cases forensic patients may obtain cell phones as part of their release plan so they may communicate with the unit when at work or otherwise in the community. Patients in this situation must have a level 4 D or be working in the community under the supervision of their employer. In those rare cases the treatment team will approve and assure the security of the phone when not in use on a community outing.
7. Battery powered alarm clocks, clock radios, or boom boxes may be allowed in patient rooms with treatment team approval. Radios may not have telescopic antennas, and must have reception equipment that has been approved by the treatment team.
8. Miscellaneous: electrical cords are not allowed in patient rooms except for physician ordered medical devices such as CPAP machines, etc. Patients may never possess DVDs, CDs, or other such potential sharps.
9. The Director of Support Services is the only individual authorized to purchase or approve any hospital-owned or hospital-approved electronic devices, including televisions.
10. Internet access: Internet access for patients is approved only for hospital-owned computers in the computer lab of the Mall. The computer lab is open during designated hours and is constantly monitored by a staff person at all times it is open. Patients who misuse the privilege of internet access may risk losing computer lab privileges.

V. RESPONSIBILITIES

a. Risk Manager

1. Shall review this policy at every three years or as needed.
2. From risk management processes, recommends hospital-wide policy and departmental/unit procedural changes, including what should be considered contraband.
3. Makes recommendations to other stakeholders as needed to refine/develop departmental procedures.

b. Director of Nursing

4. Shall establish and implement procedures for contraband searches and screenings upon admission of patients, and when there is reason to believe contraband may be present on a patient's person (except cavity searches).
5. Shall establish and implement procedures for preventing contraband from coming onto the units. Develop, maintain and revise written procedures in Nursing Protocol and Procedures that details any items that may be allowed in specific areas of the units and/or under what intensity of supervision, subject to assessment by the patient's treatment team. What is allowed on the unit can be further restricted by Physician Order with rationale, but not exempted/authorized by such an order.
6. Establish practice standards related to conducting searches and screenings within all lines of nursing supervision.
7. Ensure Documentation is entered into patient records whenever contraband is found/confiscated or when searches are conducted in accordance with a physician's orders. Documentation entered into the medical record will include:
 - Date, time and location of search.
 - Information shared with the patient(s) prior to the search.
 - Result of the search.
 - Patient response and actions taken.
8. Staff is not to read mail unless requested by the patient. Patients have a right to receive sealed and unopened mail. Requesting that a patient open his or her mail in the presence of staff so the contents of packages and envelopes can be screened for contraband preserves this patient right and also meets the hospitals obligation to provide a safe care environment. If there is reason to believe that patient mail contains contraband, such mail may, upon written order of a physician or superintendent, be subject to physical examination in the recipient's presence if appropriate. An itemized list of any materials confiscated must be documented in the patient's treatment record. Any restriction to the right to communicate by mail as detailed above must be consistent with the Rights of Recipients (Physician Order, with rationale, documented in the chart).
9. Monitor NOD implementation of established policy and nursing procedure related to contraband and searches during evenings, nights and weekends.

c. Physician

- a. If there are additional restrictions for specific patients, writes orders for those restrictions in keeping with Rights of Recipients.
- b. Provides authorization for conducting searches of a patient's person for contraband when deemed necessary. If a body cavity search is necessary, performs that procedure in keeping with medical practice standards.

d. Safety Officer

- a. Shall establish and implement procedures for screenings to prevent contraband from coming into the facility by visitors, staff, and patients returning from short leave through security.
- b. Persons visiting patients will be checked in at the main entrance in keeping with hospital policy, any may be asked to allow staff to screen items brought into the hospital. If the visitor refuses such a screen, the item will not be brought into the hospital.

e. Discipline Chiefs and Department Heads

- a. Develop, maintain and update any area/department specific procedures and protocols related to management of contraband, written in Organizational Plan of Operation (OPO) for that department/area.
- b. For the area of oversight (e.g., Treatment Mall, Dental clinic) defines any items in the OPO that may be allowed in specific areas and/or required intensity of supervision for particular items, subject to assessment by the staff member supervising the area or activity.
- c. Educates others as needed to maintain associated safety protocols for the area.
- d. Consider recommendations from Risk Manager and other stakeholders to refine/develop departmental procedures.

f. All Staff and Contractors

- a. Use of all storage facilities, including but not limited to lockers, desks, and parking lots, is granted by Riverview. All storage facilities are Riverview's property and remain under the control, custody, and supervision of the hospital. Patients, staff and visitors have no expectation of privacy in Riverview's storage facilities for any items placed in such storage facilities. Patients, staff, and visitors do have the right to be free from unnecessary searches of person, and their personal space. The search must be conducted in a sensitive manner and be minimally intrusive.
- b. When any staff member notices an item that could be considered contraband, they shall take immediate actions to address any related safety issues, promptly notify direct supervisor as soon as possible (not to exceed 1 hour), and start an incident report for that supervisor's review, that will be completed prior to the end of the shift.
- c. When it is necessary to conduct a search, it will be carried out in a professional and courteous manner recognizing the intrusion to personal privacy that occurs. For patient searches, the search may not be any more intrusive than necessary to ensure the patient is not in possession of any contraband.
- d. Unless there is an imminent threat, staff members will obtain authorization from a physician, program service director, or licensed nurse in charge prior to searching a patient or patient possessions for contraband.
- e. If there is an imminent threat to safety, the search may be carried out by staff members and notice provided to the physician, program service director, or nurse in charge immediately afterward.
- f. Searches may also be conducted when indicated in accordance with other relevant policies and procedures (e.g., suicide precautions, self-mutilate precautions, inventory control). At least two staff members shall be present when conducting searches of patients or their living areas.
- g. Patient room searches will be conducted with the patient present unless (a) if there is cause to believe a highly dangerous item (i.e., could be used as a weapon immediately) may be hidden in the room; (b) the patient declines to be present, (c) the patient interferes with the search or (d) the patient is not able to be present due to clinical or medical issues. In these situations the room search may take place without the patient present. All non-contraband articles shall be put back in an orderly manner.
- h. All common areas such as unit dayroom, bathrooms, activity yards, and gymnasium, cafe and group rooms including treatment mall rooms may be searched without restriction.
- i. For any search of person or property, the reason for the search shall be explained in a straightforward manner.

- j. Any illegal items found during such and examination will be confiscated by the hospital and given to law enforcement for further disposition. Any other contraband shall either be released to a person of the patient's choosing (e.g., parent, guardian, friend) or be held in safekeeping and returned to the patient upon discharge depending on the nature of the item, except that no medication shall be released without the authorization of a physician.
- k. Any search of body cavities other than the mouth or ears must be authorized by a physician's order specifying the type of search. If authorized, a body cavity search may only be conducted by a physician or licensed independent practitioner.
- l. Items identified as missing or stolen shall be returned to the rightful location or owner.
- m. Whenever searches are conducted or contraband is identified, this triggers an incident report. The incident report is to include a record of the search, all findings and any action taken. (See nursing search protocol)

- VI. RESPONSIBILITY:** All hospital staff
- VII. POLICY STORED IN:** Superintendent's Office
- VIII. POLICY APPLIES TO:** Riverview Psychiatric Recovery Center
- IX. KEY SEARCH WORDS:** Contraband