



## COLUMBIA REGIONAL CARE CENTER

## PATIENT HANDBOOK

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**WELCOME**

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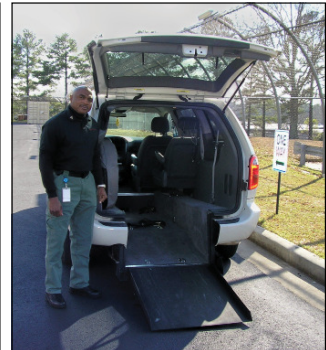
# WELCOME



Columbia Regional Care Center (CRCC) has prepared this handbook to furnish you with facts regarding services and opportunities available at the Center. If you are aware of what is expected of you and what services exist for your benefit, you can make a better adjustment.

You should keep this handbook for permanent reference while at CRCC. We encourage you to take advantage of all opportunities and programs offered at the Center to improve yourself.

The information contained in this handbook is taken from CRCC's Policies and Procedures. When given a lawful command, even if not addressed by this handbook, you must comply with the instructions of the Center staff member.



# Columbia Regional Care Center



CRCC is a Wellpath, LLC facility that focuses on providing and combining secure treatment services with subacute, skilled nursing, chronic, terminal medical treatment and mental health care under a common administration by professional private sector management.

CRCC shall provide the community with quality care services for special needs patients through:

- Operating a safe, humane, and secure environment;
- Delivering services in a caring spirit; and promoting an atmosphere where the love of God and neighbors flourishes.



# Expectations

CRCC has established expectations and standards of conduct to promote respect, safety, conformity and a comfortable environment for both patients and staff.

We do our best to provide for your safety while you are in the hospital. We ask that you help us with this. Patients who are more involved in their care in the hospital tend to do better and stay safer. By working with us, you can lower your risk of injury and make your hospital stay as safe as possible.

Here are some tips you can follow to help us maintain your safety:

- Identify yourself: Make sure that you wear your hospital I.D. wristband at all times.
- Please follow hospital rules. They are there for your and other patients' safety.
- Ask questions if you do not understand what is being asked of you. It is your right to know why something is being done.



# Privacy Practices

CRCC promises to protect your confidential information. Our privacy practices are described in our “Notice of Privacy Practices.” This booklet explains how these procedures will be carried out by all hospital staff, security personnel, volunteers, and business associates of CRCC.

# Risk Management & Safety Program

We believe all persons are entitled to care in an environment free from harm. To maintain such an environment, all events which cause or may cause harm to persons or property are reported. This information is analyzed so that corrective or preventive actions may be taken.

Our Risk Management and Safety programs are part of a larger Performance Improvement process to constantly improve hospital services. If you see anything at the hospital that you feel is unsafe, please notify hospital staff promptly. For your safety, certain areas of the hospital are monitored by video cameras.



## Ethics Committee

In some cases, issues regarding your care may also be addressed by the hospital's Ethics Committee. Further information about this committee is available on each Care Unit. Please ask one of the treatment team staff for more information.



# Intake Process

## ID Wristband

Upon your arrival at CRCC, you will receive a photo identification wristband. Wristbands will be worn on the left wrist, unless a medical condition prohibits. It will contain your photo, name, CRCC number, and sending facility/agency.

- If it comes off, please notify staff and they will replace it. You will not be permitted to leave the unit without your I.D. wristband.
- Check the information on your hospital I.D. wristband to make sure that all of the information is correct.
- Make sure that staff members check your I.D. wristband before any test is performed or when giving you medication.

*You must wear your ID wristband with the picture showing outward at all times.*

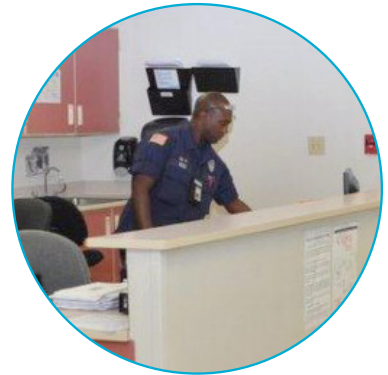
## Consequences For Failure To Wear Or Tampering With Your ID Wristband

1. You will **not** be able to order items from the Canteen.
2. You will **not** be able to receive visitors, make telephone calls or have library or horticulture privileges.
3. May affect your points and level (please check with your mental health clinician for details on this system).
4. A written account will be made part of your record when you return to your sending agency—and could effect your release date.

## HIPAA and Rights & Responsibilities

During the Intake process you will be provided copies of and required to sign an Acknowledgement/Receipt of the following:

- Patient Rights and Responsibilities
- Notice of Privacy Practices
- Medical Treatment Consent



# Intake Process



## Language Translators

If English is not your primary language, you can request the services of a translator. Notify a staff member so that proper arrangements may be made to accommodate your needs.

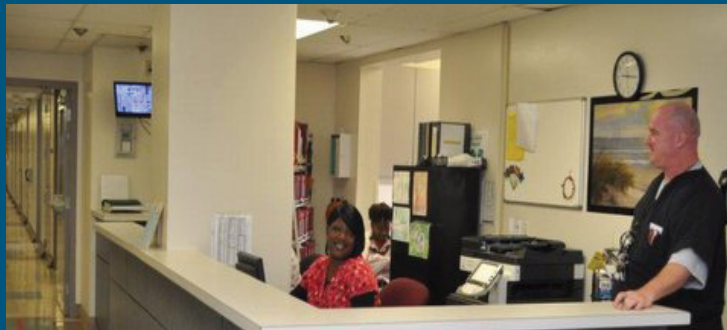
## Admission Assessment

Upon admission, you will be requested to provide medical history information. Nurses will review the information with you and ask questions to clarify responses. **It is very important that you answer all questions honestly and to the best of your ability.** Routine procedures, such as vital signs, weight, blood, and urine specimens will be performed by the nursing staff on your assigned unit.

## Inform the Healthcare Provider, Nurse or other Medical Staff of the Following:

- Any medical conditions including diabetes, high blood pressure, heart problems, kidney problems, tuberculosis, AIDS or the HIV virus.
- Any prescribed medications you are presently taking, as well as any that you or your healthcare provider recently discontinued.
- Any medication or allergies you may have.

Your failure to furnish complete and accurate information to health care providers may seriously jeopardize your health.





# Intake Process

## Nutritional Assessment

After admission, a physician's diet order will be written for each patient and a nutritional assessment will be completed. Any allergies and religious preferences will be taken into account. A nutritional consult can be ordered at any time by the medical provider based on your nutritional/dietary needs.

## Dental Screening

You will receive a dental screening within 8 hours of your intake processing. This is a clinical observation and does not constitute a diagnosis or treatment plan. You may report the need for emergency dental treatment at any time. Emergency dental conditions include severe toothaches, abscesses, and fractures of teeth or jaw.

## Hygiene Items

Every patient is issued one (1) of each personal hygiene item once they arrive to their assigned unit. Depending on the unit you are assigned to, you are responsible for securing your personal hygiene items and for using them appropriately.

## Health Care

You will receive health care by a team of licensed health care providers, which includes physicians, mental health providers, nurses, technicians, and others.



***You have the right to refuse health care treatment.***

## Participating In Your Care

- Provide accurate information about your past history and current concerns.
- Discuss your personal recovery plan with your healthcare team.
- Make sure that you understand and agree with your plan.
- Be informed about your treatment and medication.
- If you are experiencing pain, inform your nurse or health care provider. Most pain can be controlled. You and your healthcare team can work together to manage your pain.



# Sick Call

## Procedural Guidelines

- Sick call is the system whereby a patient reports and receives individualized and appropriate health care for non-emergency illnesses or injuries. Sick call will be conducted daily by a qualified health care professional. This is done either in the patient's room for non-ambulatory patients or by taking a verbal/written request at the nurse's station.
- You may initiate the sick call process by verbalizing your specific medical complaint to any member of the CRCC staff or completing a written sick call request. Any patient complaints made to a non-healthcare staff member will be reported to the Charge Nurse for follow-up.
- The Registered Nurse will evaluate and treat the patient according to policy and procedures. A complaint dealt with by nursing protocols which occurs three (3) times in a seven (7) day period will be referred to a healthcare provider for assessment. Any complaints/requests that are not covered by the nursing protocols will be referred to the healthcare provider.
- All routine referrals to the healthcare provider will be seen on regular healthcare provider rounds.
- All emergencies will be reported immediately to the healthcare provider for evaluation and/or referral.

## Nurse Call Button And Emergency Medical Needs

A Nurse Call and/or Panic Button is available in each room. It has been placed there to call for medical assistance in times of legitimate need. You should not hesitate to use to use the Call/Panic Button when you have a situation that you cannot attend to yourself and need immediate help. It should be pointed out, however, that repeated abuse of the Call/Panic Button for trivial matters, or to harass nursing personnel, will result in disciplinary action and could effect response time when there is a real problem. To call a Nurse, press the red colored button and then release. A member of the nursing staff will respond as quickly as possible. Emergency services are available twenty-four hours a day. All medical emergencies will be assessed and determined by a qualified health care provider. If the health care provider prescribes medication, a medical staff member will administer it to you at the prescribed time(s).

# Your Part in Your Care & Safety / Helpful Tips About Medication

## Your Part In Your Care & Safety

Everyone has a role in making your stay here at Columbia Regional Care Center safe. Your role includes speaking up if you have questions or concerns or if you do not understand your recovery plan. Participate and make decisions in your care and learn from your hospital experience. Know your medications and understand how they will help you.

If you experience any unsafe conditions or unanticipated outcomes in your treatment and/or medical care, it should be reported to your unit nurse/recovery team for review and appropriate action. **You** can play an important role in achieving the best outcome from your medication. To ensure medications are used safely and effectively, follow these tips:

- Maintain a list of all your medications and learn the names, purpose, dosage strength, and schedules of your individual medications.
- Maintain a list of medications that you cannot take (for reasons like allergic reactions) and be able to explain the reasons why.
- Don't hesitate to ask questions regarding anything you do not understand or that does not seem right.
- Verify your understanding of proper medication use and effects by repeating this information to your health care providers (for example, during your recovery team meetings).

## Helpful Tips About Medication

There are four (4) main types of medication used to treat mental illness. Here is a brief summary of each type of medication. More detailed information can be given to you by your nurse or doctor.

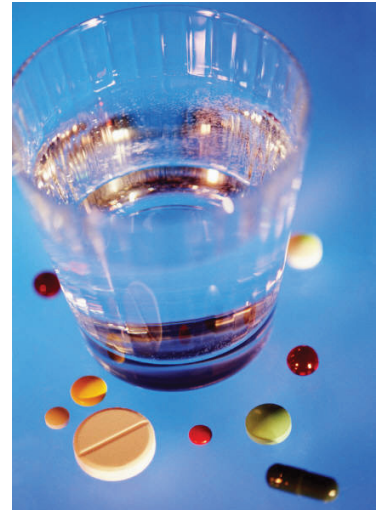
1. **Antipsychotics:** Examples include: Risperdal, Seroquel, Haldol, Zyprexa, Geodon, Abiligy, Invega. These medications lessen hallucinations (voices), stabilize mood swings, aid you in concentration, lessen paranoid and bizarre thoughts, and help you to be able to care for yourself.
2. **Antidepressants:** Examples include: Lexapro, Prozac, Effexor, Wellbutrin, Paxil. These medications help lessen the symptoms of depression that last at least two weeks such as: being withdrawn, change in eating or sleeping habits, thoughts of harming self, and feelings of hopelessness.
3. **Mood Stabilizers:** Examples include: Lithium, Depakote, Tegretol, Trileptal. These medications even out your mood, preventing the real high and low mood swings that you may experience and that your family might notice.
4. **Antianxiety:** Examples include: Vistaril, Klonopin, Ativan, Buspar. These medications are used to decrease severe anxiety and calm nerves. These can produce physical and psychological dependence and withdrawal symptoms. If you are addiction prone or an addict, you should be under careful observation when taking these medicines.

# Pharmacy Services

## Examples of Medication Side Effects

Some possible side effects of medications are:

- Headaches
- Excessive thirst
- Frequency in urinating
- Constipation
- Diarrhea
- Weight gain or loss
- Rash
- Sensitivity to sun/sunburn
- Dry mouth
- Change in blood pressure
- Dizziness
- Restlessness
- Stiffness in joints/slowed movements
- Irritability



## Notify A Health Care Provider About:

1. Any troublesome or distressing side effects you may experience.
2. Any over-the-counter or prescription medication prescribed by other health care providers that you are taking.
3. Any herbal products or vitamins you are taking.
4. Any questions you have about the specific medication(s).

# Dental Care

Routine dental care includes treatment for cavities, bleeding gums, need for cleaning, broken or lost fillings, and broken dentures.

Routine dental treatment is available by appointment only. In order to ensure that proper attention is provided, you should briefly describe the problem to the attending healthcare provider and the Charge Nurse will submit your name on the dental list so that you will be seen. During your initial dental examination, you will be advised by the dentist of any badly broken or diseased teeth that should be removed.



## You Have The Right To Refuse Dental Treatment

Poor eating habits, coupled with poor daily cleaning habits, usually result in dental disease. Daily preventive dental care is your responsibility and is extremely important. A toothbrush will be issued to you upon arrival.

# Mental Health Services

At CRCC, a program exists to provide for the safety, security, and treatment of patients with mental health problems. Mental health patients with emergency or acute medical problems will be transported to a local hospital for treatment if needed.

Patients in an acute stage of mental illness will be treated at the facility. The appropriate agency will be notified should off site services be required. Diagnosis and recommendations will be noted on the psychiatric evaluation by the attending Psychiatrist.



## Evaluation

1. A Psychiatric Evaluation will be completed after admission or referral and will include a brief medical history; a mental status examination including suicidality and homicidality; a history of the current illness; a description of the patient's current attitudes and behavior; an estimate of intellectual functioning, memory functioning and orientation; and an inventory of the patient's assets.
2. A Psychosocial Assessment by a licensed mental health professional or someone seeking licensure under the direct supervision of a licensed mental health professional will be completed after admission.
3. A Personal Safety Plan will be completed by a licensed clinician after admission. The Personal Safety Plan assists with the determination of the patient's personal preference for techniques of de-escalation to prevent displays of aggression.
4. When additional assessments, such as intellectual assessments, suicide assessment, etc. are needed, documentation will include findings, plan of action, and be signed and dated by the clinician.
5. Brief Medical screenings will be performed by licensed medical providers.

# Mental Health Services



## Treatment Program

1. A multidisciplinary treatment plan will be generated during the first treatment team meeting, but no later than seven days after admission. The treatment plan will be reviewed by the clinical treatment team and updated at a minimum of every six months. However, the team will discuss the treatment process monthly with the patient.
2. A Treatment Plan consists of a series of written statements specifying a patient's particular course of treatment and the roles of qualified health care professionals in carrying it out. The plan is individualized, multidisciplinary and based on assessment of your needs. The treatment plan is developed by a multidisciplinary team of professionals at the time the condition is identified and updated as warranted.
3. Group therapy will be provided on each unit. Groups such as Life Skills, Coping Skills, Horticulture Therapy, other educational classes, and the Work Therapy Program are available to all patients. The treatment may include group and individual counseling.
4. The use of a Behavior Step Plan or Behavior Improvement Plan is discussed by the treatment team and implemented by security, nursing, and mental health staff. An approved copy of any current behavioral management plan will be placed in the Behavioral Management section of the chart.
5. Individual counseling will be provided based on a physician approval. The assigned licensed clinician will document each session following the therapy.
6. Crisis intervention services will be provided as needed.
7. Substance abuse group therapy is provided by a licensed clinician as appointed.

## Description of Level System

Unit three (3) is designed to have three (3) Areas of Treatment (AOT) that are focused on motivating patients to stabilize and restore their emotional and behavioral control:

- Red Level
- Yellow Level
- Green Level

Patients can earn points by group therapy participation, behavioral improvement plans, Step Program, treatment team participation, and individual therapy sessions. Patients can “cash-in” earned points for special events.



# Mental Health Services

## Treatment Team Progress Reviews

In conjunction with your sending agency, you will be scheduled for a Progress Review based on a review schedule. At this Progress Review, your behavior and adjustment for the stated period will be evaluated. The report will address the entire spectrum of your facility life. It is a permanent part of your record and a copy will be sent to your parent agency. Therefore, you should assist in making sure it is as accurate and thorough as possible. During Progress Reviews, several things may be accomplished, such as your visiting list may be updated, and requests for program changes can be reviewed and discussed with you.



One of the most important aspects of the Progress Review is your behavior. The team will, at this time, answer any questions you have regarding your behavior and stay at CRCC. Any programs that you are involved in or need to become involved in will be discussed.

The basic purpose of the Progress Review is to document your progress and keep you informed of how you are doing. The Progress Review time should also be utilized in planning for the future. Come to your review prepared to ask questions and contribute to the procedure.

Keep in mind that this review is an instrument that can either help or hinder your stay at CRCC. If you received a good evaluation during the preceding review period, it will be noted on these documents. On the other hand, any bad reports will be shown as well. Your participation in the programs available at CRCC will also be listed on these documents.



# Patient Rights and Responsibilities

## Patient Rights

1. Right to equal treatment regardless of race, religion, ethnicity, handicap, or sexual orientation.
2. Right to practice religious activities, including silent prayer and moments of reverence, attending organized religious gatherings, and counsel with ministers.
3. Right to safe living conditions, including hygienic accommodations and a safe and secure environment.
4. Right to protection from abuse, including physical abuse, emotional abuse, and other forms of exploitation.
5. Right to freely speak and express oneself in writing.
6. Right to health care, including necessary medical, mental health and dental treatment, and nourishing meals.
7. Right to be informed regarding facility policies, procedures, practices, and guidelines.
8. Right to receive and maintain approved personal possessions, including mail or other personal property.
9. Right to access legal counsel, including confidential conversations and correspondence, and right to electively consent and participate in recreational, educational, and psychotherapeutic activities.
10. Right to protection from retaliation.

## Patient Responsibilities

1. Responsibility to respect the natural and rightfully chosen differences between people.
2. Responsibility to be tolerant of the choices of others regarding their practices and beliefs about a higher power, and responsibility to not impose personal beliefs upon them.
3. Responsibility to ensure others' comfort and safety by exercising appropriate care and precautions when using facilities.
4. Responsibility to treat others with courtesy and respect, seeking not to take advantage of them, or manipulate them.
5. Responsibility to not be offensive and responsibility to utilize appropriate channels of communication.
6. Responsibility to communicate genuine personal needs and responsibility to respect the needs of others.
7. Responsibility to limit approved personal possessions to items that can be safely contained in authorized space.
8. Responsibility to earnestly engage counsel for representation.
9. Responsibility to sincerely and meaningfully take part in those activities for which consent is provided.
10. Responsibility to communicate with staff effectively to get individual needs met, and to use the appropriate grievance procedure in a meaningful manner.





# Patient Rules

1. During counts, televisions and radios will be turned off. Patients in the dayroom will return to their room.
2. You are not permitted to enter any area of the facility other than the one to which you are assigned without specific direction and escort.
3. Under no circumstances is a patient allowed to enter another patient's room.
4. No patient is allowed in any office area without a staff member present.
5. It is your responsibility to keep the immediate area near your bed clean and sanitary at all times. If a patient is physically unable to assist in this, housekeeping will ensure that the area is clean and sanitized. Paper and debris are not to be left on the floor, under or around the beds.
6. Items are not to be laid or stored on vacant beds.
7. All items must be properly stored or they will be confiscated.
8. Shoes will be neatly stored under the bed.
9. Fire and Safety Regulations prohibit:
  - Cardboard boxes, plastic bags or milk cartons from being stored in the unit.
  - Blocking the ventilation grills and the placement of any article over the window or door windows.
10. Pictures will not be hung, taped or fastened in any way on room walls, ceilings, doors or beds.
11. Patients will not put up makeshift clotheslines.
12. Smoking is strictly prohibited.
13. Emergency situations such as fire, flooding due to plumbing failure, fellow patient in distress, etc. will be reported immediately to a staff member.
14. The volume of all televisions and recreational activities will be kept at a minimum as to not disturb others and will be monitored by the Unit Custody Officers.



# Patient Rules



15. Television for authorized patients will be permitted only during the times specified below:

a. Monday – Thursday	9:00 a.m. - 11:30 p.m.
b. Friday	9:00 a.m. - 12:00 midnight
c. Saturday	8:00 a.m. - 12:00 midnight
d. Sunday	8:00 a.m. - 11:30 p.m.
e. Nights Preceding Holidays	8:00 a.m. - 12:00 midnight

16. Occasionally, special events may be approved for extending viewing hours through the entirety of a program. The Shift Supervisor has the authority to approve this extension.

17. Television is a privilege and not a right. In the event of a disagreement regarding program selection, the Custody Officer of the Unit will make the program choice to best satisfy the majority. If that does not resolve the matter, officers are well within their authority to turn the television off. The Shift Supervisor has the authority to deny this privilege in order to maintain the order and security of the Care Unit.

18. The Care Unit lights will be turned off at:

a. Sunday – Thursday	11:30 p.m.
b. Friday & Saturday	12:00 midnight
c. Nights Preceding Holidays	12:00 midnight

19. All talking and unnecessary movement shall cease after lights are turned off and during counts.

20. Patient radios must be battery operated and equipped with earphones. Radios may be taken to the recreation area, but otherwise are not permitted off the Care Unit.

21. No wire of any type will be connected to the radio as an antenna or antenna extension. Failure to comply with this guideline can result in confiscation of the radio.

## Marriage of a Patient

Patients will not be allowed to marry while at CRCC.

# Personal Daily Living Needs

**Hygiene Items:** To ensure that each and every patient is able to comply with the grooming and clothing standards set forth at CRCC, you will have access to the following items:

## Grooming Kit:

- Razor—controlled as required
- One (1) toothbrush
- One (1) tube of toothpaste
- Liquid soap
- One (1) comb – controlled as required
- One (1) deodorant

## Bed Linen, Towels & Wash Clothes:

- One (1) towel
- One (1) washcloth
- Two (2) sheets
- One (1) pillowcase
- One (1) blanket
- One (1) mesh bag

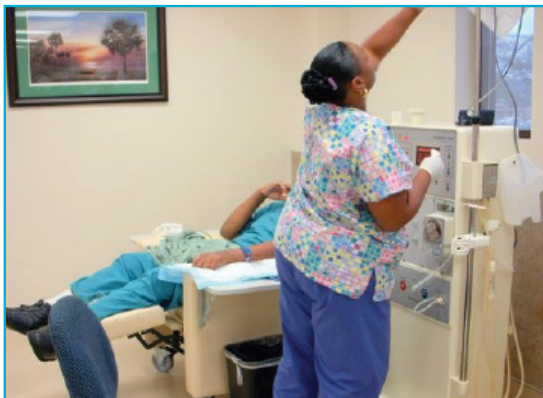
## Clothing:

- One (1) scrub uniform
- Three (3) pair of socks
- Three (3) pair of underwear/tee shirts
- One (1) pair of tennis shoes
- One (1) pair of shower shoes



Health and comfort items will be inspected by CRCC staff prior to distribution. These items will be distributed to every patient on an as needed or on a direct exchange basis. Some replacement clothing can be purchased from the canteen.

Patients may receive replacement items only in exchange for worn out items. The staff will ensure that you are provided with the supplies you need, but there must be strict controls placed in order to prevent waste and abuse.



# Personal Daily Living Needs

## Laundry Services

Laundry services are provided to all patients. Your Care Unit staff will help you with questions regarding laundry schedules and clothing exchange.

- All personal items of clothing are laundered on site. Other items and linens are sent to an off-site Contractor.
- Each unit is scheduled certain days of each week to do patients personal laundry on site.
- The personal laundry is washed by the nursing staff on night shift on the assigned laundry days.
- The patients place their clothing in the provided mesh bag and the staff will collect it from each room.
- It will be returned to the appropriate patient after laundry service is completed.
- Be sure all items and mesh bag are labeled with your name to assure the appropriate items are returned to you.
- Uniforms are not washed in the facility. They are sent out to a contract laundry service. Please do not place uniforms in the mesh bags to be washed by staff.

Day	Morning Shift	Evening Shift
Monday	2	4
Tuesday	2	7
Wednesday	5	3
Thursday	5	7
Friday	6	4
Saturday	6	3
Sunday	1	7



# Personal Daily Living Needs

## Authorized Personal Items

The following list is an example of authorized items that you may be allowed to have in your possession as determined by the health care professional and the Security Director.

## Health & Comfort Items

- One (1) comb (plastic or flexible)
- One (1) pair prescription eye glasses
- One (1) set of dentures
- Artificial limbs
- Two (2) handkerchiefs (plain white)

## Religious Materials

All religious material must be approved by the Chaplain and the Security Director. Religious materials may not be inflammatory or disparaging to any religious or racial group. Examples of items you may be allowed to have in your possession are:

- Holy Bible
- Book of Mormon
- Book of Buddhism
- Holy Quran or Koran

## Miscellaneous Personal Items

- Miscellaneous personal items such as pictures, letters, address books, calendar, etc. may be permitted as approved by the Security Director.
- Provisions will be made to assist indigent patients with social needs.



# Personal Daily Living Needs

## Proper Storage Of Personal Property

Patients will store approved personal property in approved CRCC issued containers. No property will be on the walls, heaters, windows, ceiling, sink, door, mirrors or air vents. Any violation of this regulation may result in disciplinary action and confiscation of the items.



# Count Times

The security staff will make scheduled counts to ensure the presence of assigned patients. Compliance with the count procedure is of the utmost importance. No movement will be allowed within the Center once a headcount begins.

## Count times are as follows

7:30 a.m.  
12:00 noon  
3:30 p.m.  
7:00 p.m.  
9:30 pm (Photo Roll Call Count)  
11:30 p.m.  
4:00 a.m.



Unscheduled counts will be held as situations dictate. When an unscheduled count is announced, you will be expected to comply with Security Officers' directions promptly and without discussion.

# Fire

All areas of CRCC will have a primary evacuation plan posted in a conspicuous location to ensure the safety of all patients, employees, and visitors. All evacuation plans will lead directly to a hazard-free area where supervision and continued medical care will be provided. The fire evacuation rules are for your safety. Failure to follow instructions may result in disciplinary action.


# Mail

While at CRCC, you may send and receive mail subject to CRCC rules and regulations. All mail will be inspected by the Mailroom for contraband. Your mail will not be censored. Incoming legal mail between you and your attorney or the courts will be opened in your presence and checked for contraband. You may not use the mail to plan any kind of illegal activities. You may not correspond with anyone in another correctional facility without approval from the Facility Administrator or Security Director. If you desire to correspond with another family member who is incarcerated, you must first submit a Patient Communication Form through the Security Director or Facility Administrator.

CRCC provides indigent patients with postage to send one (1) free letter per week. The day designated for mailing these free letters is Wednesday of each week.

There are restrictions on what type of magazines you may receive. If you have questions as to what type of magazines you may receive, you may submit a Patient Communication Form to the Security Director for clarification/approval. All approved magazines must come directly from the publisher.

A return address for both incoming and outgoing mail must be on the envelope in order for it to be processed. The correct mailing address for CRCC is as follows:



Your Name, Hospital Number  
Your Housing Unit and Bed Assignment  
Columbia Regional Care Center  
7901 Farrow Road  
Columbia, SC 29203



# Visitation

At CRCC, you are encouraged to maintain close contact with your family. We understand the importance of family support and will do everything reasonable to facilitate it.

As a matter of general practice, members of your immediate family, 12 years of age and older, will be permitted visitation. Visiting hours are on Saturday and Sunday from 8:30 am until 4:00 pm. Physical contact between you and visitors is strictly prohibited.

The approved visitation list from your sending agency will be strictly adhered to unless the agency provides other instructions or permission in writing. If we do not have an authorized list from your sending agency you will be asked to complete a Request of Authorized Visit List for up to 10 family members that will be maintained in your Security File.

## Visit Request Process

- You must submit a Patient Communication Form weekly with the names of the individuals you wish to have visit and date of visit.
- The visitation request must be submitted no later than noon every Friday.
- The names you submit on the Communication Form will be verified to determine if they are on your approved visitation list. Anyone not on the approved list will be denied visitation.
- The Communication Form will then be submitted to the Security Director for final approval.
- Your name and the authorized visitors will then be placed on the Weekend Visitation List.

## Special Visits

Special visits are visitations that occur outside the normal visitation schedule (Saturday, Sundays, Holidays).

- A special visit can be requested by the patient using the Communication Form or by an authorized visitor, by telephone, at least 48 hours prior to the requested visit.
- Special visits will only be approved by the Facility Administrator, Assistant Facility Administrator or Security Director.

Because CRCC is a secure treatment facility and many patients are here with serious communicable health problems, children under 12 years of age are not permitted to enter during regular visits. Visitation with children under the age of 12 (for up to 2 hours) will be scheduled the third weekend of each month unless changed or cancelled for security reasons. Exceptions for terminally ill and hospice patients can be made on a “case-by-case” basis, and only on the recommendation of the staff social worker, health care provider or chaplain.

Visitors will be allowed to have no more than \$20.00 in their possession at the time of their visit in order to purchase items from the vending machine. It is your responsibility to advise your family or friends of the rules governing visitation.





# Library/Reading Material



Reading material will be made available through the library. Check with your social worker for assistance in receiving reading material.

# Recreation

The only area allowed for indoor recreation is the Dayroom. These areas are restricted when recreation is not in progress. Television and/or indoor games may begin at 8:30 a.m., if the unit cleanliness meets the Custody Officer's approval. The Dayrooms will close at 9:00 p.m. Outdoor recreation and exercise is available, weather and other conditions permitting, at least five (5) hours per week.



# Telephone

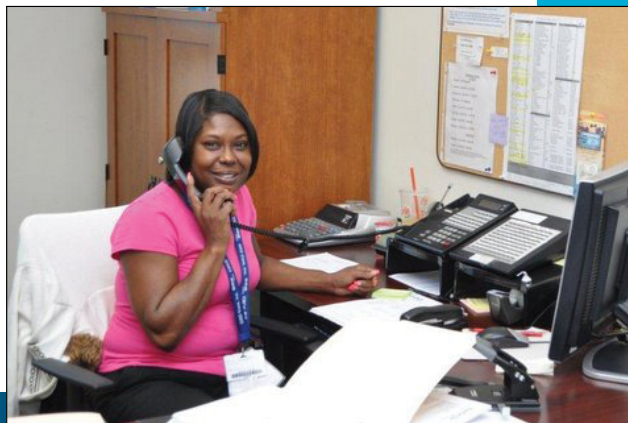
**All personal patient telephone calls are recorded.** Any call placed to your attorney of record will not be recorded. In order for a call to your attorney to not be recorded you must:

- Submit a Communication Form to the Security Director listing the name, address, and telephone number (including area code) of the attorney(s).
- After verification and receipt of an official correspondence from the attorney's office, the number will be blocked from recording.
- You should only use the number(s) you provided to speak with your attorney. All other numbers will be recorded.

Each Care Unit is equipped with telephones for patient use. The telephone system is available from 9 a.m. until 9 p.m., seven days a week. Phone minutes can be purchased through the canteen and accessed with the pin number you are provided.

Incoming emergency phone calls will be referred to the Shift Supervisor or other appropriate CRCC staff. Emergencies will be verified before being discussed with you. You will be allowed to use a telephone with approval of the Shift Supervisor or other appropriate CRCC staff in emergency situations.

All patients are expected to display proper courtesy and discipline in utilizing the Care Unit phones. The Unit Custody Officer will establish a list of those patients who wish to use the phone. This list will be adhered to in the order written. Phones on the units are programmed to limit calls to twenty (20) minutes. When the allotted time has expired, the telephone will automatically disconnect.



# Pastoral Care Services

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Pastoral Care Services are provided to support the religious, spiritual, moral, and ethical needs of the patient population at CRCC. Individual religious needs will be met in conjunction with available space, security, and medical requirements.

The staff chaplain is a licensed clergy member of a recognized religious denomination. The chaplain is responsible for providing religious support and pastoral care consistent with the moral and ethical well-being of the entire facility. Patients' religious freedom and personal rights are respected regardless of their religious affiliation.

Chaplains are authorized to conduct rites, sacraments, and services as required by their respective denomination. The staff chaplain is considered a teacher in the area of religious instruction. The chaplain is also responsible to the Facility Administrator for conducting and maintaining religious education programs.

The staff chaplain serves as Volunteer Coordinator for the facility. Approved volunteers will contribute to the spiritual well-being of patients and their families by:

- Developing a pastoral relationship with individual patients.
- Participating in necessary activities associated with Wellpath, LLC. and CRCC.
- Conducting programs for the moral, spiritual, and social development of patients and their families.
- Being available to all patients for pastoral activities and spiritual assistance.
- Contributing to the rehabilitation of patients through worship services, pastoral activities and by cooperating with other members of the staff, denominational boards, committees, and clergy.

# Patient Canteen

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The purpose of the Canteen is to provide you with items of convenience, at the lowest practical price. The purchase of items from the Canteen must be governed by the below listed rules:

- You will receive a Canteen Order Sheet every week. Order sheets will be turned in on Sunday night in the appropriate location and your orders will be filled and delivered to you on Wednesday morning. In the event of a Holiday these days may change but every effort will be made to make sure that you get your Canteen Orders filled on the day designated. You will be notified if there are any changes to the day the orders need to be turned in or when you will receive them.
- You may purchase/possess health and comfort items based on your points and level as described earlier. The amount you may spend on these items is also based on your points and level. Under no circumstances will any patient be allowed to order more than \$50 per week from the canteen.
- You may not share items with or purchase items for other patients.
- The amount of items you may order from each section is listed at the top of each section. If you order more than the allowed amount for that section, items will be arbitrarily crossed off until the amount is at the allowed level.
- Large quantity purchases for the obvious purpose of bartering or resale to fellow patients is not permitted.
- If you place an order you **may not refuse it** when it is delivered.
- If there is an error in your order, or you are missing items you have been charged for, we will make sure that you are credited for those items.
- All containers/wrappings should be properly discarded after the product has been removed/consumed.

If there are items that you think would be helpful to the general patient population, you may submit a request to add those items to the Canteen Order Sheet to the Assistant Facility Administrator for review. Requests will be evaluated on the basis of need, cost, and security considerations.

# Patient Bank

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CRCC provides a Patient Trust Fund service. This fund is administered as follows:

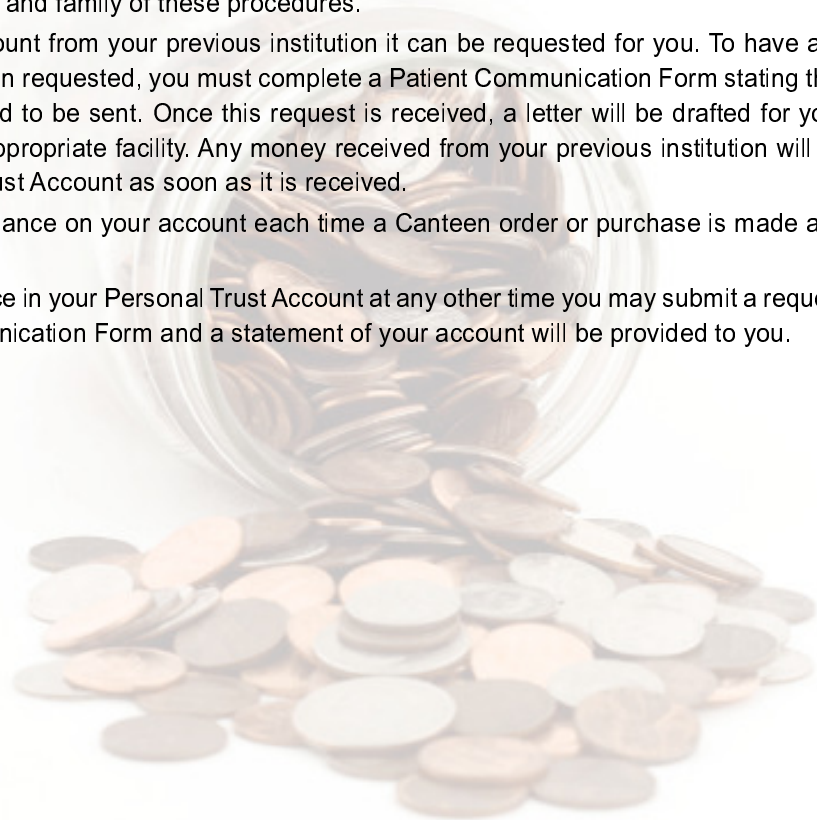
1. All deposits must be received as follows:
  - Through the United States Postal Service to the attention of :

Columbia Regional Care Center  
Attention: Patient Canteen Fund  
PO Box 23587  
Columbia, SC 29224

- Online or by Telephone as follows: [www.GovPayNow.com](http://www.GovPayNow.com) or call 888-277-2535
- You will need:

Your Credit or Debit Card  
Patient's name, number and location  
Pay Location Code – 5500

2. The only negotiable items accepted for deposit in your account will be United States Postal Money Orders, other recognized money orders, cashier's and government checks. All other negotiable items (i.e., cash, traveler's checks or personal checks) will not be accepted and will be returned to sender. It is your responsibility to advise friends and family of these procedures.
3. If you have money in an account from your previous institution it can be requested for you. To have any funds from a previous institution requested, you must complete a Patient Communication Form stating that you want your funds requested to be sent. Once this request is received, a letter will be drafted for your signature and mailed to the appropriate facility. Any money received from your previous institution will be deposited in your Personal Trust Account as soon as it is received.
4. You will be provided with a balance on your account each time a Canteen order or purchase is made and whenever there is a deposit.
5. If you need to know the balance in your Personal Trust Account at any other time you may submit a request in writing on a Patient Communication Form and a statement of your account will be provided to you.



# Legal Issues

## Special Legal Problems

This is an issue that should be addressed separately from all other types of problems since it is often a source of confusion for newly assigned patients.

You may have a situation during your period of incarceration at CRCC when your sentence is reduced, increased, modified or changed in some way. In instances such as these, CRCC has no authority in these matters. It is generally a good idea to contact your attorney, the sending facility, or the courts, if you have a problem of a legal nature. Neither the employees of CRCC nor any Center official can assist you in any meaningful way, other than to help explain what changes have been ordered. You will find your attorney, the sending facility, and the courts much more knowledgeable regarding your legal options.

## Legal Services

CRCC maintains a limited library of legal materials and access to LexisNexis, a legal computer program. Patients may make a request to use these items. If you are in need of assistance in these areas, arrangements should be made through your sending agency. CRCC staff members cannot be actively involved in your legal affairs other than to assist with obtaining access to the available legal material. If you need assistance:

- Send a Patient Request Form to the Education Instructor
- Attempts will be made to provide you with the requested material within ten (10) working days.

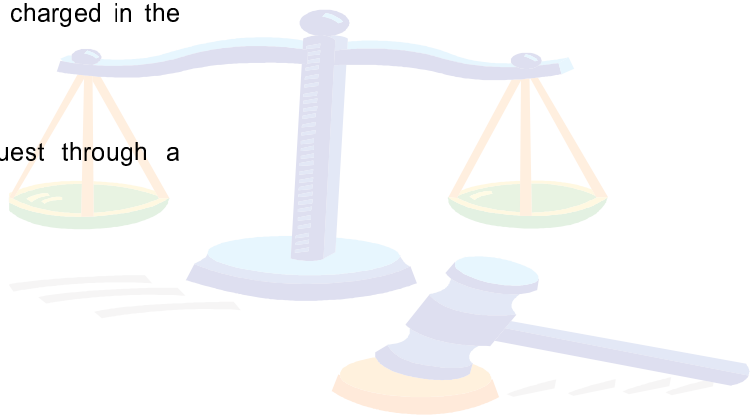


## Photocopies

Patients requiring photocopying should submit a Patient Request to the mailroom. Photocopies will be made at a cost of ten (10) cents a page. A limited number of photocopies of legal documents may be made for patients who are indigent; however, the patient's account will still be charged in the event funds become available later.

## Notary Service

Notary services are available upon request through a Patient Communication Form.



# Patient Grievance Procedure

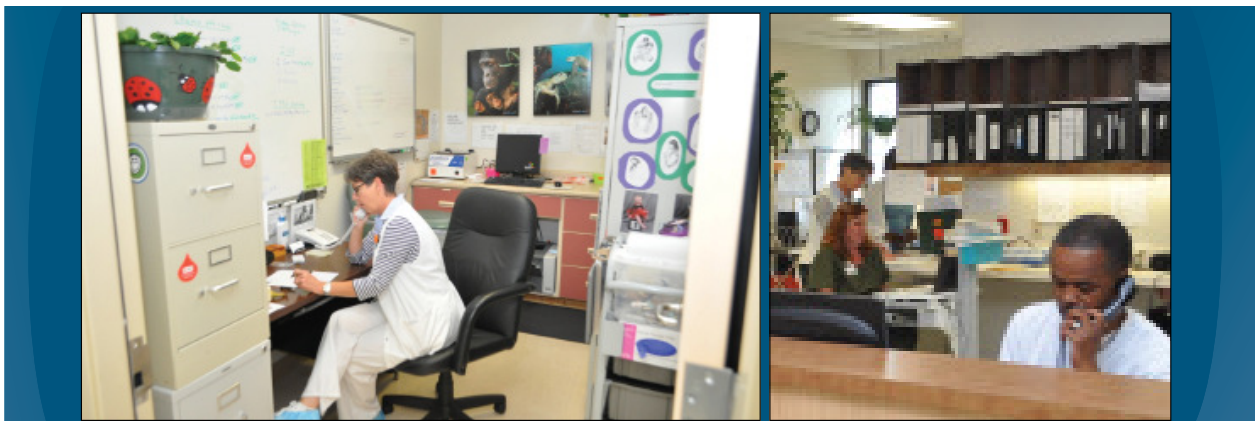
A Grievance is regarded as a formal complaint of an incident, policy or condition within CRCC. Grievances can often be resolved quickly through direct communication with the staff person(s) responsible for the affected area of the grievance. In order for the Grievance Procedure to function properly, you can be assured that no retaliation will be taken against you for filing a legitimate complaint. At the same time, you must not abuse the system by knowingly and intentionally making a false statement or repeatedly submitting frivolous claims. When filing a Grievance, complete each section, writing only in the space provided for your use. It is important to state what you expect on the form.

No patient will be subjected to reprisal, retaliation, harassment, or disciplinary action for filing a formal grievance, or participating in the resolution of a formal grievance.

The Risk Manager / Patient Advocate will be designated as the Grievance Coordinator. The Grievance Coordinator will ensure that all CRCC patients have access to the grievance process, and the formal and informal request system.

Patients found to be misusing or abusing the patient formal grievance system will be subjected to limitation.

- Misuse or abuse of the grievance system refers to:
  1. Repetitive filing of grievances on the same matter.
  2. Filing grievances that contain vulgar, indecent, offensive or insulting language.
  3. Filing grievances to harass individuals or disrupt the operation of the facility.
  4. Filing grievances not designed to lead to any practical result.
  5. Filing grievances with knowledge that they contain false statements for the purpose of causing harm to CRCC or its personnel.
- Limitation refers to a sanction imposed on a patient found to be abusing or misusing the patient formal grievance system. Patients subjected to a limitation may still utilize the grievance system for processing other legitimate grievances that do not relate to the matter(s) for which the limitation was imposed.
- When a person misuses or abuses the formal grievance system, further grievances received on the same matter will have "GRIEVANCE NOT ACCEPTED DUE TO" stamped on them. A copy will be made for the Grievance Coordinator's file and the original will be returned to the patient.



# Patient Grievance Procedure



Valid formal grievances include, but are not limited to the following:

- Discriminatory Policies and Procedures.
- Actions of a staff member toward a patient.
- Actions of a patient toward another patient. The writer of the grievance must be one of the patients involved in the situation.
- Theft and/or destruction of patient property.
- Inappropriate disciplinary actions.

Invalid formal grievances include items such as:

- Requesting a change of Unit, room or roommate assignment.
- Grievances requesting that a specific person not be allowed to work on a specific unit or terminated.
- Grievances concerning hearsay information.
- Grievances about situations not involving the writer.
- Any issue outside of the control of CRCC such as:
  1. State and federal court decisions.
  2. Decisions made by the sending facility, including placement and discharge.
  3. State and federal laws and regulations.

In those cases where a question may arise as to whether an issue is a valid formal grievance, the Grievance Coordinator will confer with the Facility Administrator. The Grievance Coordinator will advise the patient as to the



# Prison Rape Elimination Act

## Sexual Assault, Abuse, and Harrassment Awareness

All patients at CRCC have a right to be safe and free from sexual harassment and sexual assault. There is a “zero tolerance” policy here at CRCC and prevention is a top priority. Standards are in place for the detection, prevention, reduction, and punishment of prison rape. Prudent efforts will be made to ensure the safety of the patient and staff.



**It is a Duty to  
Report Abuse,  
Neglect or  
Exploitation**

## Definitions

A. Carnal Knowledge: Contact between the penis and vulva or the penis and the anus, including penetration of any sort, however slight.

B. Oral Sodomy: Contact between the mouth and the penis, the mouth and the vulva or the mouth and the anus.

C. Sexual Fondling: The touching of a private body part of another person for the purpose of gratification.

D. Sexual Assault with an Object: The use of any hand, finger, object or other instrument to penetrate, however slightly, the genital or anal opening of the body of another person.

E. Rape: The carnal knowledge, oral sodomy, sexual assault with an object or sexual fondling of a person forcibly or against that person's will.

### Patient-on-Patient Sexual Abuse/Assault

Sexual abuse is used to describe a broad range of sexual activity including nonphysical sexual behavior. Sexual assault is used to emphasize violent sexual behavior:

A. Contact between the penis and vulva or the penis and anus, including penetration, however slight.

B. Contact between the mouth and the penis, vulva, or anus.

C. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument.

D. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person, excluding contact incidental to a physical altercation, and

E. Coercion into sexual acts by threatening another patient with physical violence or bodily injury.

# Definitions

## Staff-On-Patient Sexual Abuse/Assault

Sexual abuse/assault between staff, contractors, or volunteers and patients include:

- A. Contact between the penis and vulva or the penis and anus, including penetration, however slight,
- B. Contact between the mouth and the penis, vulva, or anus,
- C. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument,
- D. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person, which is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to arouse, abuse, or gratify sexual desire, and
- E. Any display of a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks or breasts in the presence of a patient.

## Staff Sexual Misconduct

Staff sexual misconduct is characterized by behaviors between a staff member and patient which can include, but are not limited to, indecent, profane or abusive language or gestures and inappropriate visual surveillance of patients.



# Assault/Abuse

## Prohibited Acts

A patient, who engages in inappropriate sexual behaviors with or directs it at another, can be charged with the following Prohibited Acts under the Detainee Disciplinary Policy:

- Using Abusive or Obscene Language
- Sexual Assault
- Making a sexual proposal
- Indecent exposure
- Engaging in sexual acts

## Detention As A Safe Environment

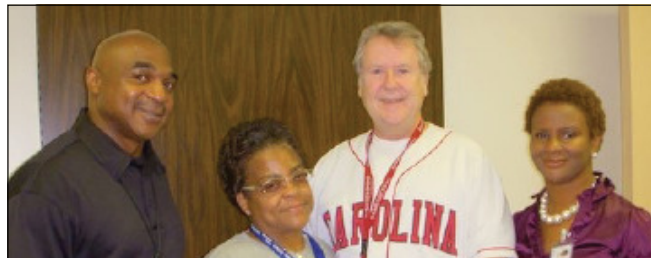
While you are detained, no one has the right to pressure you to engage in sexual acts or engage in unwanted sexual behaviors regardless of your age, size, race, or ethnicity. Regardless of your sexual orientation, you have the right to be safe from unwanted sexual advances and acts.

Remember, due to the nature of incarceration, NO sex in prison or at CRCC is considered consensual sex regardless of the nature of the act. This includes sex with other patients and/or institutional personnel. Take ALL sexual contact seriously and treat it as an assault.

## Confidentiality

Information concerning the identity of a patient victim reporting a sexual assault, and the facts of the report itself, shall be limited to those who have the need to know in order to make decisions concerning the patient's welfare and for law enforcement investigative purposes.

**Report All Assaults or Abuse**



# Assault/Abuse

## Report All Assaults

Employees will accept all reports made verbally, in writing, anonymously, and from third parties and shall promptly document and verbal reports. If you become a victim of a sexual assault, you should report it immediately to any staff person you trust, to include housing officers, chaplains, medical staff, or supervisors. Staff members keep the reported information confidential and only discuss it with the appropriate officials on a need to know basis. If you are not comfortable reporting the assault to staff, you have other options:

## U. S. Marshal's Patients

- Write a letter reporting the sexual misconduct to the person in charge of the United States Marshal's patients.
- To ensure confidentiality, use special (Legal) mail procedures.
- File a Detainee Grievance (DA1). If you decide your complaint is too sensitive to file with the officer in charge or unit nurse, you can file your Grievance directly with the Patient Advocate. You can get the forms from your unit officer, or a facility supervisor.
- Write to the Office of Inspector General (OIG), which investigates allegations of staff misconduct, or you may write to the Federal Bureau of Prisons. The addresses are:

U. S. Department of Justice  
Office of Inspector General  
P. O. Box 27606  
Washington, DC 20534

OR

Central Office  
Federal Bureau of Prisons  
320 First Street N.W.  
Washington, DC 20534

Call, at no expense to you, the Office of Inspector General.  
The phone number is 1-800-869-4499.

## South Carolina Department of Mental Health Patients

- You may call the South Carolina Law Enforcement Department (SLED),
- The State Long Term Care Ombudsman, or
- The Lieutenant Governor's Office at the following numbers:

866-200-6066 – SLED  
803-734-9900 – Long Term Care Ombudsman  
800-868-9095 – Lieutenant Governor's Office

# Assault/Abuse

## South Carolina Department of Corrections, Georgia Department of Corrections and All Others

- File a Detainee Grievance (DA1). If you decide your complaint is too sensitive to file with the officer in charge or unit nurse, you can file your grievance directly with the Patient Advocate. You can get the forms from your housing unit officer, or a facility supervisor.
- Write to the Office of Inspector General (OIG), which investigates allegations of staff misconduct, or you may write to the Federal Bureau of Prisons. The addresses are:

U. S. Department of Justice  
Office of Inspector General  
P. O. Box 27606  
Washington, DC 20534

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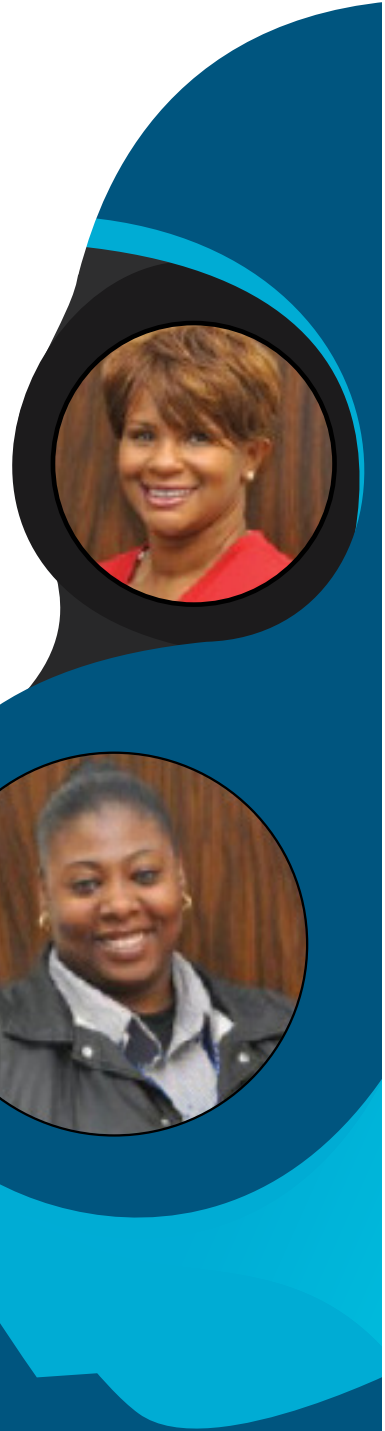


# Security Operations

Security is the concern of everyone, but primarily the duty of the Custody Officers. Custody Officers have a role of providing for security, custody, and control of all patients held in CRCC. Your housing unit is supervised by Custody Officers who are trained to provide assistance. You are encouraged to try to solve your own individual problems in a responsible manner. However, problems may arise that will be beyond your control. Do not hesitate to discuss these matters with a staff member of CRCC. If they cannot assist, they will be able to refer you to someone who can.

## Self Discipline, Rules & Regulations

Self-discipline is the most important part of maintaining order. This occurs when you are aware of the Rules and Regulations and, through your own self-discipline and determination, follow them. An orderly Correctional Community is necessary to maintain an effective program. You are expected to follow the rules and be respectful of others within CRCC. Good order and discipline will be maintained and you can expect corrective action for any violation of facility Rules and Regulations. The Rules and Regulations are listed in this manual for your benefit. All staff members are responsible for maintaining order and protecting your well-being by enforcing the Rules and Regulations.



# Formal Disciplinary Action

A Disciplinary Report will be written by staff members observing a rule violation or having evidence that a violation of the Rules and Regulations has been committed. You will be given a copy of the charges placed against you and you will have a formal hearing before a Hearing Official. Each case is processed on an individual basis. Depending on the seriousness of the offense, a wide-range of corrective measures can be applied. Loss of privileges and disciplinary confinement are some of the disciplinary measures available. If you are found guilty, the Disciplinary Report will become a part of your Institutional Record. Disciplinary Reports may delay program considerations and suspend your privileges.

## Disciplinary Severity Scale And Prohibited Acts

Code	Greatest Offense Category Prohibited Acts
100	Killing
101	Assaulting any person (including sexual assault) or an armed assault on the institution's secure perimeter (a charge for assaulting any person at this level is to be used only when serious physical injuries have been attempted or carried out by a patient)
102	Escape from an escort; escape from a secure institution (low, medium and high security level and administrative institutions)
103	Setting a fire( This category applies only when found to pose a threat to life serious bodily harm or in furtherance of a prohibited act of greatest severity, e.g. in furtherance of a riot or escape: Otherwise the charge is properly classified Code 218 or 329.)
104	Possession, manufacturing or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous chemical, escape tool/device, explosive or ammunition
105	Rioting
106	Encouraging others to riot
107	Taking hostage(s)
108	Refusing to provide a urine sample to take part in drug-abuse testing
109	Threatening a staff member, law enforcement, security officer or public official with bodily harm
198	Interfering with a staff member in the performance of duties (conduct must be of the greatest severity)
199	Conduct that disrupts or interferes with security or the orderly operations of the facility (conduct must be of the greatest severity)

## Greatest Offense Category Sanctions

- A. Initiate criminal proceedings
- B. Disciplinary transfer to another unit
- C. Disciplinary segregation (up to 90 days)
- D. Make monetary restitution (if funds are available)
- E. Loss of privileges, e.g. canteen, recreation, free time, etc (in conjunction with A-D).

# Formal Disciplinary Action

Code	High Offense Category Prohibited Acts
200	Escaping from unescorted community
201	Fighting, boxing, wrestling, sparring, and any other form of physical encounter, including horseplay that causes or could cause injury to another person
202	Possession or introduction of an unauthorized tool
203	Threatening another with bodily harm
204	Extortion, blackmail, protection, demanding or receiving money, canteen or any other form of payment for protection, avoiding bodily harm or threat of being informed against
205	Engaging in sexual acts
206	Making sexual proposal or threat to another
208	Wearing a disguise or mask
209	Tampering with or blocking any locking device
210	Tampering with food or drink
211	Possession, introduction, or use of narcotics, narcotic paraphernalia, or drug not prescribed for the individual by the medical staff
212	Possessing an officer's or any staff member's clothing
213	Engaging in or inciting a group demonstration
214	Encouraging others to participate in a work stoppage or to refuse to work
215	Refusing to provide a urine sample or otherwise cooperate in a drug test
216	Introducing alcohol into the facility
217	Giving or offering an official or staff member a bribe or anything of value
218	Giving money or receiving money from any person for an illegal or prohibited purpose, such as introducing/conveying contraband
219	Destroying, altering, or damaging property worth more than \$100
220	Being found guilty of any combination of three high moderate or low moderate offenses within 90 days
221	Signing, preparing, circulating or soliciting support for prohibited group petitions
222	Possessing or introducing an incendiary device, e.g., matches, lighters, etc.
223	Any act that endanger person(s) and/or property
*298	Interfering with a staff member in the performance of duties (conduct must be of highest severity). This charge is to be used only when no other charge of high severity is applicable.
*299	Conduct that disrupts or interferes with the security or orderly operation of the facility (conduct must be of highest severity). This charge is to be used only when no other charge of highest severity is applicable
*	When the prohibited act is interfering with a staff member in the performance of duties (Code 198, 298, 398 or 498) of conduct that disrupts (Code 199, 299, 399 or 499), the disciplinary hearing officer should specify in its finding the severity level of the conduct, citing a comparable offense in that category. For example, we find the act of ___ to be of high severity, most comparable to Code 213, "engaging in a group demonstration."

## High Offense Category Sanctions

- |  |   |
|--|---|
| A. Initiate criminal proceedings                                       | G. Removed from program and/or group activities |
| B. Disciplinary transfer (recommended)                                 | H. Loss of job                                  |
| C. Disciplinary segregation (up to 30 days)                            | I. Impound and store patient personal property  |
| D. Make monetary restitution (if funds are available)                  | J. Confiscate contraband                        |
| E. Loss of privileges, e.g. canteen, recreation, unit activities, etc. | K. Room restriction                             |
| F. Change housing unit   | L. Warning                                      |



# Formal Disciplinary Action

Code	High Moderate Offense Category Prohibited Acts
300	Indecent exposure
301	Stealing
302	Misuse of authorized medication
303	Loss, misplacement, or damage of a less restricted tool
204	Lending property or other item of value for profit/increase return
305	Possession of item(s) not authorized for receipt or retention; not issued through regular channels
306	Refusal to clean assigned living area
307	Refusing to obey the order of a staff member or officers (may be categorized and charged as a greater or lesser offense, depending on the kind of disobedience: continuing to riot is Code 105-Rioting; continuing to fight is Code 201-Fighting; refusing to provide a urine sample, Code 215
308	Insolence toward a staff member
309	Lying or providing false statement to staff
310	Counterfeiting, forging, or other unauthorized reproduction of money proceedings or other official documents or item, e.g. security document, identification cards, etc. (may be categorized as greater or lesser offense, depending on the nature and purpose of the reproduction, e.g., counterfeiting release papers to effect escape-Code 101 or 200).
311	Participating in an unauthorized meeting or gathering
312	Being in an unauthorized area
313	Failure to stand count
314	Interfering with count
315	Making, possessing, or using intoxicant(s)
316	Refusing a breathalyzer test or other test of alcohol consumption
317	Gambling
318	Preparing or conducting a gambling pool
319	Possession of gambling paraphernalia
320	Unauthorized contact with public
321	Giving money or another item of value to, or accepting money or another item of value from anyone, including another patient, without staff authorization
322	Destroying, altering, or damaging property (facility or another person's ) worth more than \$100
*398	Interfering with a staff member in the performance of duties (conduct must be of highest severity). This charge is to be used only when no other charge of high severity is applicable.
*399	Conduct that disrupts or interferes with the security or orderly operation of the facility (conduct must be of highest severity). This charge is to be used only when no other charge of highest severity is applicable
note	Any combination of high moderate and low moderate offenses during a 90-day period shall constitute a high offense.

## High/ Moderate Offense Category Sanctions

- |   |   |
|---|---|
| A. Initiate criminal proceedings                            | H. Loss of job                          |
| B. Disciplinary transfer (recommended)                      | I. Impound and store patient's property |
| C. Disciplinary segregation (up to 72 hours)                | J. Confiscate contraband                |
| D. Make monetary restitution                                | K. Restrict to housing unit             |
| E. Loss of privileges: canteen, recreation, free time, etc. | L. Reprimand                            |
| F. Change housing   |   |
| G. Remove from program and/or group activities              |   |

# Formal Disciplinary Action

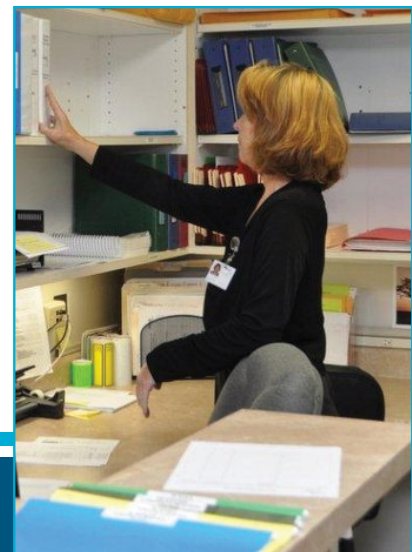
Code	Low Moderate" Offense Category Prohibited Acts
400	Possession of property belonging to another person
401	Possessing unauthorized clothing
402	Malingering, feigning illness
403	Smoking where prohibited
404	Using abusive or obscene language
405	Tattooing, body piercing, or self-mutilation
406	Unauthorized use of mail or telephone with restriction or temporary suspension of the abused privileges often the appropriate sanction
407	Conduct with a visitor in violation of rules and regulation(with restriction or temporary suspension of visiting privileges often the appropriate sanction)
408	Conduction of a business
409	Possession of money or currency, unless specifically authorized
410	Failure to follow safety or sanitation regulations
411	Unauthorized use of equipment or machinery
412	Using equipment or machinery contrary to posted safety standards

## Low Moderate Offense Category Sanctions

- A. Make monetary restitution
- B. Loss of privileges: canteen, recreation, free time, etc.
- C. Change housing
- D. Remove from program and/or group activities
- E. Loss of job
- F. Impound and store patient's property
- G. Confiscate contraband
- H. Restrict to housing unit
- I. Reprimand
- J. Warning

## Violation of State / Federal Law(s)

In cases such as participation in escape, riot, assault, or other serious violations, formal charges may be made and your case referred for prosecution. You can be prosecuted in outside court in addition to action through CRCC's disciplinary procedures.



# Patient Release

Your release from CRCC will be determined by your medical condition and the laws, policies, and procedures of the committing authority (county, city, state, federal). You will be provided this information as it becomes available to CRCC.



# Special Communication Issues

Problems are going to arise while you are at CRCC. Perhaps the most important step in solving a problem is to address the proper individual or department. Below is a list of anticipated problems and the correct responsible authority to contact. Though it is understood that all problems are not covered here, this can be used as a guide while you are here. If you do not have access to the person you need to contact, send a Patient Request Form to that person or department. Patient Request Forms are available on each Care Unit.

ISSUE	RESPONSIBLE AUTHORITY
Canteen Account Issues.....	Canteen Manager/Security
Clothing.....	Intake
Death of Family Member.....	Chaplain/Social Worker/Security
Dental.....	Sick Call
Diet Health.....	Medical Admin./Food Services
Substance Abuse.....	Social Worker/Medical Services
Patient Trust Account.....	Business Office
Grievance.....	Risk Manager
Legal Issues.....	Education
Mail.....	Security/Mailroom



# Daily Operating Schedule

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## Daily Operating Schedule

4:00 a.m.	Informal Count
6:00 a.m.	Wake-up/Lights On
6:00 a.m. - 7:30 a.m.	Breakfast
7:30 a.m.	Formal Count
8:30 a.m.	Dayroom Open
11:00 a.m. - 12:30 p.m.	Lunch
12:00 p.m.	Formal Count
3:30 p.m.	Formal Count
4:00 p.m. - 5:30 p.m.	Dinner
6:00 p.m.	Activities Resume
7:00 p.m.	Formal Count
9:00 p.m.	Dayroom Close
9:30 p.m.	Photo Roll Call Count
11:30 p.m.	Informal Count
11:30 p.m.	Lights Out (Sunday - Thursday)
12:00 a.m.	Lights Out (Friday - Saturday)

# Patient Handbook

## Acknowledgement of Receipt

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Patient Name \_\_\_\_\_ CRCC# \_\_\_\_\_

Important Phone Numbers: \_\_\_\_\_

Date Received: \_\_\_\_\_





