

# A Helpful Guide for Your Stay







# Welcome to Gracie Square Hospital

Our mission is to provide compassionate, expert care to everyone who walks through our doors. We want your stay to be as comfortable as possible, so please refer to this guidebook for important information on services, safety guidelines, and other helpful resources.

We encourage you to be an active participant in your care. Please share information with your Care Team about your medical history, personal preferences, and support person(s). If you have any questions about your care, treatment, or discharge instructions, please ask a member of our staff. Your Care Team is committed to supporting you and your support person(s) during your stay.

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# Admitting Process

An initial evaluation will be performed by an interdisciplinary team to assess your condition and your needs. You will meet with your Care Team to develop a treatment plan and goals for your hospitalization. Once you are stabilized, you will be referred for the appropriate level of outpatient care, which may include a partial hospitalization program or other mental health services.

## Individualized Crisis/Safety Plan

As part of the initial assessment process, staff will inquire about your individual preferences and recommendations on how we can work with you if or when an emergency situation may warrant the use of seclusion or restraint. These preferences or recommendations will be used to develop an Individualized Crisis/Safety Plan, which is intended to:

- Help you during the earliest stages of distress or escalation before a crisis erupts
- Help you identify practical coping strategies
- Help staff plan ahead and know what to do for each patient if a problem arises
- Help staff use interventions that reduce risk and trauma to patients



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# Different Types of Inpatient Hospital Admissions

## **Voluntary admission**

When the individual, the family, a psychiatrist, or other behavioral health professional decides that hospitalization is needed, and the individual agrees in writing.

## **Involuntary admission**

When two doctors examine the patient and certify in writing that a psychiatric illness presents a danger to the patient or to others, that the patient does not recognize or accept the need for treatment, and there is no other safe form of treatment available.





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# Treatment Approaches Tailored to Each Patient

Each patient's treatment program is individualized to their specific needs. The different methods may include:



## Group therapy

Led by multidisciplinary staff, groups provide patients with an opportunity to share common concerns, learn from one another, and practice new skills.



## Therapeutic activities

These services help patients improve daily functioning at home or work, in school, and during leisure time. These include self-managed and wellness activities, creative arts therapy, activities focused on school and work, leisure activities, and social/family relationships.



## Medications

Treatment plans may include medications that are prescribed by doctors or nurse practitioners. Patients, family members, and support persons are encouraged to attend classes about medications, which are conducted by nurses and pharmacists.



## Individual therapy

The patient and staff work together to identify and resolve problems related to the patient's psychiatric illness.



## Family education & supportive therapy

Recognizing families' important role in supporting patients toward recovery, families and other support persons are invited to participate in family meetings to share and receive information about illness, treatment, and discharge plans.

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For more information on treatment methods for an individual patient, please contact your Care Team.



# Care Team

During your stay, you will be cared for by an expert team of mental health professionals, known as your Care Team. These highly skilled individuals are dedicated to providing you and your support persons with high-quality care in a compassionate and supportive manner. They are also available to address any needs and questions you may have.



During the initial evaluation, a diagnosis is made and treatment is planned. Throughout your stay, your diagnosis is reevaluated, and the treatment plan can change as your condition changes. After a treatment plan is developed, you, your support person or guardian, and the Care Team work together to carry out the plan. We encourage your support person or guardian to participate in your treatment. The more they know about and understand an illness, the more they can support you during your treatment and recovery.



As part of our Care Rounds, members of your Care Team will check in with you throughout the day. Please do not hesitate to ask questions or share information about your medical history or personal preferences.



For your safety, your Care Team will review the information on your hospital identification (ID) band before tests, procedures, or giving you medications. Please wear your ID band at all times.

# Mental Health Professionals Involved in Your Care



## Doctors & Nurse Practitioners

Several doctors and/or nurse practitioners may be involved in your care. Psychiatric providers lead the interdisciplinary team and prescribe medications. Medical providers are available as needed to prescribe medications or other treatment for active medical conditions.



## Psychologists

Our psychologists' partner with treatment teams in diagnosing various mental health disorders. In addition, they are actively involved in providing individual and group therapy sessions and formulating behavioral plans for our patients.



## Therapeutic Activities

Therapeutic activities staff provides skills training and coping tools to help patients develop socialization, leisure, vocational, and independent living skills for returning to the community.



## Nurses

Nurses work closely with the doctors and other members of your Care Team to coordinate your care and treatment, help educate you about psychiatric illnesses, and dispense medication. Your nursing team includes a patient care director (PCD), clinical nurse manager, and clinical registered nurses (RNs). The patient care director supervises nursing care on designated units, while RNs plan and assign care tasks as needed.



## Social Workers

Social workers will address the psychosocial aspects of your illness. They also provide a link to family members who can support you in your recovery. They work with you and your family/support person(s) to set up your discharge plan, which includes services that are recommended by the Care Team for your ongoing care.



## Other Team Members:

- Care coordinators
- Chaplains
- Dining hosts
- Environmental services
- Nursing Assistants
- Patient services administration
- Pharmacists
- Security officers
- Unit clerks

## Care Team Employee Badge

Staff members and volunteers are required to wear identification badges with their names, photos, and roles. If you are unsure about someone's identity, contact a member of your Care Team.







# Health & Safety

At Gracie Square Hospital, we want to work closely with you to ensure that you receive the best care possible.



## Medications & Allergies

We want you to fully understand your treatment and encourage you to ask about all of the medications you are given and why you are taking those medications. Inform your Care Team if you have any allergies to medications, food, or any other substances. A nurse will review your medication plan with you, but please ask questions if you are unsure why a certain medication is being prescribed. Patients and support persons are encouraged to attend classes about medications, which are conducted by nurses and pharmacists.

## Passes & Off-Site Appointments

Passes for patient visits outside the hospital are granted by the Care Team if they are an important part of treatment or discharge planning. Support persons or guardians may discuss arrangements about a patient's pass with a member of the Care Team. Patients may also need to leave the hospital for a medical or dental appointment, interviews with community residence programs, or to apply for benefits at the Social Security Office. Family members or a support person may be requested to accompany patients. It is required that a staff member escort a patient to any appointment or interview outside of the hospital.







## Personal Accounts & Valuables

We encourage you to send your valuables home with a friend or support person for safekeeping. Jewelry, credit cards, and other valuables brought into the hospital will be stored in a secure envelope in a safe location. Under no circumstances should valuables be kept on the unit. The hospital does not assume responsibility for money and valuables kept on the unit.

**Note: If you lose something, please notify your nurse right away and we will make every effort to find it. Unclaimed articles are turned in to the hospital's security department.**



## Preventing Infections

Protecting yourself from infections is a key part of staying healthy during your stay. The best way to reduce the risk of infection is to make sure that you and your visitors wash your hands with soap and water or use hand sanitizer.



## Pain Management

Helping you manage pain is very important throughout your treatment. Please communicate with your Care Team about any pain you are experiencing. They will ask you to describe your pain and other questions to help gauge your pain level. You may be asked to rate your pain on a scale of 0 to 10 or to choose a face on a scale that indicates your level of pain. This information helps them decide if adjustments are needed to your treatment or medication. If you experience any pain, please let your Care Team know immediately.

## Safety Precautions

For the safety and security of our patients and staff, certain items are not allowed on patient units without permission.

**The following items are not allowed on patient units. This is not intended to be a complete list, and additional items may be prohibited by your Care Team:**

- Aerosol and soda cans
  - Alcohol or illicit drugs
  - All recording devices, including any electronics with the ability to record or photograph
  - Belts, cords, ropes, straps, electric cords, and clothing with cord or strings (i.e., hoodies, sweatpants, or yoga pants with strings)
  - Cigarettes, matches, lighters, tobacco, vaping, and any other smoking material
  - CPAP machine and insulin pumps
  - Electric items, such as a laptop, iPad, cell phone, electric razor, electric reader, hair dryer
  - Food, unless permitted by the unit's policy
  - Glass bottles, mirrors, compacts with mirrors
  - Keys, credit/debit cards, ID card, and licenses
  - Medications of any type (over-the-counter and prescription)
  - Pencils and pens other than "safety" pens and non-toxic markers provided by the hospital
  - Pins (straight and safety)
  - Plastic bags
  - Plastic utensils
  - Anything sharp (for example, razors, tweezers, nail file, nail clipper, sewing needle, knitting needles, scissors, crochet hooks)
- Note: A patient's own tweezers, nail clippers, or crochet hook may at times be part of the unit sharp count and signed out by patient for use if deemed clinically appropriate.
- Toxic liquids
  - Weapons of any kind
  - Wire hangers
  - Wristwatches



Patients are not allowed in one another's rooms, and patient visits outside the hospital are granted only if they are essential to treatment. The psychiatry unit is locked so that no one can enter or leave without the Care Team's knowledge, and personnel are stationed within the unit 24 hours a day, 7 days a week. The Care Team may inspect individual patient rooms if there is reason to suspect the presence of dangerous objects or non-prescribed medication or drugs. Whenever possible, before a search is done, the patient is informed and asked if they prefer to be present.

## Preventing Falls

Being in an unfamiliar environment and taking newly prescribed medications can put you at higher risk for a fall. We take multiple measures to help prevent falls, including helping you out of bed and being by your side during walks and using the bathroom.

### The following steps can also help:

- Follow the Care Team's instructions to prevent falls
- Get up slowly
- Wear shoes or hospital-provided non-skid socks when you walk around
- If you wear eyeglasses, put them on before getting out of bed
- Lock the brakes before getting in or out of a wheelchair
- Stay well hydrated

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**For more information on safety precautions and hospital rules, please speak to your Care Team.**





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# Use of Restraints & Seclusion in Psychiatry

The Care Team is dedicated to preventing, reducing, and eliminating the use of restraint and seclusion. Staff work diligently to avoid situations that might lead to these interventions. Preferred methods include non-physical approaches such as spending time in a quiet environment like the Comfort Room or your room, engaging in one-on-one conversations with staff, using coping or distraction skills, or expressing feelings to supportive staff.

Our staff members are trained in using the least restrictive interventions to avoid restraint or seclusion. If such interventions become necessary, the Care Team ensures patient safety and maintains dignity throughout the process. Seclusion and restraint are used only in emergencies when all other options have been attempted or considered, and there is an immediate risk of harm to the patient or others.

Throughout any episode, patients are continuously monitored, and they are released from seclusion or restraint as soon as they meet the established safety criteria.

# Psychiatric Restraint

## Frequently Asked Questions

### **What is a restraint?**

A restraint is a manual hold or a physical or mechanical device, attached to or next to the patient's body that he or she cannot easily remove, and that restricts freedom of movement or normal access to one's body.

### **Why is restraint used?**

In psychiatry, we use restraints to protect a patient and the people nearby when a patient loses control of impulses to hurt him/herself or others and no other less restrictive intervention can be safely carried out.

### **What does a psychiatric restraint look like?**

There are different kinds of restraints that can be used in psychiatry. When a patient is a danger to themselves or others, the staff may manually restrain that patient for a brief time until the patient regains control. If there is an emergency and a patient needs medication and declines to take it by mouth, staff may manually restrain a patient so the medication can be given by injection. If a patient needs to be transported to another location to prevent injury to self or others, staff may manually restrain the patient for transport. These situations are all examples of manual restraint.

At times, to prevent imminent harm, a patient needs to be secured on a bed, with straps restricting both ankles and wrists. These are called mechanical restraints. The straps are made of a light, synthetic material that is padded to prevent injury. Occasionally, a soft fabric belt is also used to hold the patient's midsection. Care is always taken that the belt does not interfere with the patient's ability to breathe freely.

### **What steps are taken before restraint is used?**

Less restrictive methods are always used to help the patient regain control and prevent the need for restraint. These methods may include talking, reducing noise and other stimuli, helping the patient perform relaxation exercises, providing music or calming activities, administering medicine, or closer or more frequent contact with staff.

# Seclusion

## **What is seclusion?**

Seclusion is confining a person against their will alone in a room or area and prevented from leaving or reasonably is prevented from leaving or they feel or perceive that they are prevented from leaving the area or room. A patient may be secluded in the Quiet (seclusion) Room (a simple room that contains a mattress) or in any other room/area on the unit. The door to the room may be open, closed or locked depending on the patient's condition.

## **When is seclusion used?**

Seclusion is utilized when a patient is in imminent danger of hurting him/herself or others. Seclusion reduces the risk of harm to self and others and provides a quiet, safe place in which the patient can regain control. Seclusion is used only as a last resort to protect a patient from injuring self or others, and only if less restrictive techniques are not enough to prevent injury.

## **What steps are taken to try to prevent seclusion?**

Less restrictive methods are always used to help the patient regain control before seclusion is used. These methods may include talking, reducing noise and other stimuli, helping the patient do relaxation exercises, providing music or calming activities, giving medicine, or closer or more frequent contact with the staff.





# Visitor Information & Guidelines

## Visitor Information

We welcome visitors daily from 11:00 a.m. to 8:00 p.m., allowing up to two adult visitors at a time. To ensure everyone's safety, all visitors must present a government-issued ID at the lobby to receive a visitor badge, which should be worn during the visit and returned when leaving.

If you plan to have visitors under 18, please arrange this in advance with your Social Worker. Visits by minors will be supervised and may be limited in time. Our staff will assist in coordinating visits and address any specific needs or concerns to support a positive experience for both patients and visitors.

## Visitor Guidelines

The health and safety of our patients and visitors are a top priority, and we follow the latest visitation safety guidelines issued by the New York State Department of Health. Although there are specific visiting hours, they can be changed for your support person(s) if they are not convenient. If more flexible visiting hours are needed, please speak to a member of the Care Team. At times, there may be therapeutic reasons for limiting visits to a patient.

For the most up-to-date visitation hours and policies, visit <https://www.nygsh.org/visiting-policy.html>.

**Note: Visitors will need to lock up their belongings, including cell phones, computers, and electronic devices, before entering the unit.**



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# Helpful Resources & Programs

We understand how valuable it is to have support and resources easily available while you are here. Below are several services that may be helpful during and after your stay.

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## Support & Resources

### Patient Services

Patient Services Administration staff are compassionate and supportive team members who are available to respond to patient, family, or visitor concerns about patient care, patient's rights, medical ethics, and services provided by any department. Patients or families may be referred to Patient Services Administration, Monday through Friday, 9:00 am to 5:00 pm, for extra assistance by staff after they have attempted to assist and/or by the patient or family directly about their experience. On evenings, nights, holidays, and weekends, please reach out to the Nursing Administrator via the Main Information number and the call agents will help connect you for any urgent issues.

### Spiritual Care & Chaplaincy

We have a team of professionally trained multifaith chaplains who can understand and interpret the religious, spiritual, and existential experiences of our patients and their families. They visit the units regularly, offering spiritual guidance, emotional support, and opportunities for meditation or spiritual practices tailored to your needs. Weekly spirituality groups are also available as part of our Therapeutic Activities schedule. For more information, please ask a member of your Care Team.

## **Group Therapy Sessions**

The Care Team can provide information and schedules for group meetings or therapy sessions with your support persons or guardians.

## **Comfort Rooms**

A comfort room is available on every unit for patient use at any time. This area is a private space where patients can go temporarily when they wish to be alone. Music, comfortable chairs, and low lighting are among the features. Your Care Team can assist you if you would like to use this room.

## **Unit Amenities**

For your comfort and convenience, the hospital provides a range of amenities. We supply bed linens and bath towels. Each unit has a washer and dryer, including detergent, at no charge. Our facilities also offer telephones and mail service. Magazines, newspapers, and various reading materials are available through our Therapeutic Activities Department, and each unit is equipped with at least one television. Meals are served in a comfortable dining area where you can enjoy eating with others, and snacks are available throughout the day. Our dietician will meet with you to discuss your dietary needs, and we can accommodate special diets as necessary for your treatment or religious practices. For more information about these amenities, please ask any member of your Care Team.

## **Additional Resources**

The hospital provides numerous resources for patients and their support person(s) or guardian(s) during their stay in the hospital, including support group information so you can connect with others who are sharing a similar experience, patient and family education, and a library/resource center. Please don't hesitate to ask a Care Team member for information on these additional resources.



# Connect Patient Portal

You can access Connect Patient Portal through a mobile or tablet device to view your records during and after your hospital stay. You will be able to:

- Communicate with your doctor
- Access test results
- Access medical information
- View appointment summaries
- Access Care Team information

## How to Get Started

If you are new to the NYP Connect app, follow the instructions below to get started:

1. Scan the QR code for your device.
2. Download the NYP Connect app from the App Store or Google Play. Open the app, choose **Connect Patient Portal**, then **Sign Up**.



Apple  
Device



Android  
Device

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# Preparing to Go Home

We develop your discharge plan with your specific needs in mind. Once you have been discharged, it is our goal to ensure that you have a smooth and safe transition home. Discharge from the hospital usually occurs when the Care Team and the patient agree that treatment goals have been met. A patient may wish to leave the hospital before an agreement is reached.





## Discharge Information

Discharge planning for your return to the community is an important part of every treatment plan. Prepare for your discharge early so you can have a smooth transition back to the community. A member of your Care Team will guide you through the contents of your discharge envelope, which was included along with this book. You will be provided with a discharge plan, prescriptions, follow-up information, and a checklist to help you get ready to leave the hospital. We plan for patients to leave by 12 noon on the day of their discharge.

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**For more information on the discharge process, please contact a member of your Care Team.**



## Billing & Insurance

Your hospital bill should reflect the cost of your stay and any special services or procedures you received. You may be billed separately for any physician services, and not all physicians participate in the same health plans as the hospital. For further questions on billing, insurance, financial assistance, or to pay your bills, call **(866) 299-5551**.  
Monday–Thursday: 8:00am–9:00pm  
Friday: 9:00am–2:00pm.



## Medical Records

To request hospital records, you must complete the Authorization for Release of Medical Information form. This form is available in English, Spanish, and Chinese at **[nyp.org/medicalrecords](http://nyp.org/medicalrecords)**.

**On behalf of the entire Care Team at Gracie Square Hospital,  
thank you for trusting us with your care.**

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This information is brief and general. It should not be the only source of your information on this healthcare topic. It is not to be used or relied on for diagnosis or treatment. It does not take the place of instructions from your doctor. Talk to your healthcare providers before making a healthcare decision.

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