

## East Coast Forensic Hospital

### Rehabilitation Program



Artwork by: Tim Butler

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# East Coast Forensic Hospital: Rehabilitation Program

My East Coast Forensic Hospital (ECFH) health care team includes:

Primary nurse: \_\_\_\_\_

Associate nurse: \_\_\_\_\_

Psychiatrist: \_\_\_\_\_

Medical doctor: \_\_\_\_\_

Forensic case coordinator: \_\_\_\_\_

Social worker: \_\_\_\_\_

Psychologist: \_\_\_\_\_

Occupational therapist: \_\_\_\_\_

Recreational therapist: \_\_\_\_\_

Programming coordinator: \_\_\_\_\_

**Spiritual care clinician:** Available on request.

**Students:** You can choose to have a student as part of your health care team. This choice will not affect your care.

You may also meet the following staff during your stay:

- › Administrative assistants
- › Correctional officers
- › Dietitian
- › Housekeeping staff
- › Unit aides
- › Volunteers

**ECFH address:**

88 Gloria McCluskey Avenue  
Dartmouth, NS B3B 2B8

**ECFH phone numbers:**

ECFH switchboard: 902-460-7300  
Unit A nursing station: 902-460-7313 or 902-460-7314  
Unit B nursing station: 902-460-7315 or 902-460-7316  
Transition bungalow #1: 902-460-7384  
Transition bungalow #2: 902-460-7385

**Patient/family feedback (Patient Relations):**

- › Phone (toll-free): 1-844-884-4177
- › Email: [healthcareexperience@nshealth.ca](mailto:healthcareexperience@nshealth.ca)

For more information, see pamphlet 0466, *Your Rights and Responsibilities*:

- › [www.nshealth.ca/sites/nshealth.ca/files/patientinformation/0466.pdf](http://www.nshealth.ca/sites/nshealth.ca/files/patientinformation/0466.pdf)

**Patient Rights Advisor Service:**

- › Phone: 902-404-3322
- › Phone (toll-free): 1-866-779-3322

For more information, see pamphlet 1146, *Your Rights Under the Involuntary Psychiatric Treatment Act*:

- › [www.nshealth.ca/sites/nshealth.ca/files/patientinformation/1146.pdf](http://www.nshealth.ca/sites/nshealth.ca/files/patientinformation/1146.pdf)

**What is the ECFH?**

The ECFH is a medium security facility that works with the Department of Health and Wellness and the Department of Justice. Patients at the ECFH have been charged with a criminal offence. They are sent to the hospital by a judicial (court) for assessment to find out what treatment they may need.

**What is the Criminal Code Review Board?**

When someone is found to be unfit to stand trial or not criminally responsible for an offense, the Criminal Code Review Board (CCRB) takes over the case. Members of the CCRB are chosen by the Government of Nova Scotia. There must be one (1) CCRB member who is a psychiatrist at each hearing.

# Types of CCRB hearings

## First CCRB hearing

- Within 45 days of being found to be unfit to stand trial or not criminally responsible by the judge, the CCRB will meet with you and your health care team.
- You **can and should** have a lawyer at your CCRB hearings. You can plan this with nursing staff.
- All ECFH patients can be legally represented by the Nova Scotia Legal Aid lawyer who is assigned to the CCRB process. There is no fee for this.
- There will be a crown attorney (lawyer) present to represent the interests of the public.
- CCRB hearings are open to the public.
- **This hearing does not mean that you will be discharged from the hospital.** The CCRB looks at what brought you to the ECFH, your current mental health, your past mental health and criminal history, and any information from your health care team. The CCRB also decides if you are a “significant threat to the safety of the public”.
  - › The legal definition of “significant threat to the safety of the public” is: *A “significant threat to the safety of the public” requires that there must be a real risk of physical or psychological harm to individuals in the community and that the potential harm must be serious. A minuscule risk of great harm will not suffice, nor will a high risk of trivial harm. The conduct or activity creating the harm must also be criminal in nature. The court or Review Board will necessarily consider a broad range of evidence aimed at ensuring that they are able to make the difficult yet critically important assessment of whether the NCR accused poses a significant threat to public safety.* ([https://nslegislature.ca/legc/bills/59th\\_1st/1st\\_read/b109.htm](https://nslegislature.ca/legc/bills/59th_1st/1st_read/b109.htm))
- If the CCRB finds you are a significant threat to the safety of the public, they will issue a disposition (official decision) and decide on your level of community access. Dispositions and community access levels are described in this guide. Ask your lawyer or members of your health care team if you have questions about this process.
- After your first hearing, the CCRB must meet with you at least once a year to go over your progress. Your lawyer, your health care team, or the CCRB may ask for more hearings during the year.

## Restriction of liberties CCRB hearing

- You may also have a Restriction of Liberties (ROL) hearing. An ROL hearing happens when your community access level has been on hold for more than 7 days (1 week). This can happen for many reasons (such as a change in your mental health, substance use, or misuse of community access). At the ROL hearing, the CCRB will decide if the health care team may continue to limit your community access.

## Types of CCRB dispositions

The 3 dispositions that the CCRB can make are:

- › **Hospital detention order** – You will stay in the care of the hospital.
- › **Conditional discharge** – You are discharged, but must follow certain rules for a certain length of time.
- › **Absolute discharge** – You are fully discharged and are no longer under the authority of the CCRB.

## Hospital detention order

- When a judge has found you to be unfit to stand trial or not criminally responsible, you will stay on one of the Rehabilitation (Rehab) units at the ECFH. Sometimes patients are moved to a Rehab unit to help them become fit for trial. This is done to help them stay well so they can understand the court process and talk with their lawyer.
- The Inpatient Rehabilitation Service also has the Transition Bungalow Program and the Daily Living Suite. These programs let you test and practice your skills for living on your own to help you get ready to live in the community. You and your health care team will decide if these programs are right for you. Patients in these programs will live in a bungalow on the hospital grounds with other patients, or in the hospital in a 1-bedroom apartment. You must be able to do your own cooking and housekeeping, and take medications on your own.

## Programming at the ECFH

After your first CCRB hearing, you will work with your health care team to create a Recovery Plan. You will choose goals and learning to help you in your recovery. Once you have created a Recovery Plan, you will meet with your health care team every 8 weeks (2 months) to go over your progress and change your goals, if needed.

### Your Recovery Plan will include programs at the ECFH, such as:

- › education about your mental illness and medication(s)
- › education on your risk to re-offend
- › how to manage anger
- › information on getting ready to go back to work or school
- › recreation and leisure activities
- › substance use

Your health care team will help you choose programs that are right for you. They will also suggest programs for you to attend.

## Community access levels

- The CCRB considers **many things** before giving a patient community access. These include **public safety and whether the patient has the right supports** to reach their short and long-term goals. The CCRB will decide the highest level of community access for you. This is called the ‘community access ceiling’. You can work towards this level before your next CCRB hearing.
- **You will not automatically be given the highest level of community access after your CCRB hearing.**
  - › Your health care team will decide what community access level is best based on your recovery. They will ask for changes in your community access level as needed.
  - › Any changes in your community access level must be approved by the Community Access Oversight Committee, the ECFH Program Leader, and the Director of Mental Health and Addictions for Central Zone.
  - › Whenever you **are able to** access the community without being supervised (watched) by staff (you are out on a pass), you need to complete an **itinerary (plan)**. **While on a pass, you must tell the unit if you want to make any changes to your itinerary. You must also return to the ECFH on time.**



## Community access levels:

Level	Description
1	Hospital access (to access the gym, canteen, etc.)
2	Community access supervised by staff
3	Unsupervised hospital grounds access
4	Indirectly supervised community access (day pass)
5	Indirectly supervised overnight passes: Consecutive (one after the other) overnight passes to the ECFH Transition Bungalow or Daily Living Suite
6	Indirectly supervised overnight passes: Up to 6 consecutive overnight passes in the community to a location approved by the health care team and indirectly supervised by staff
7	Conditional discharge: Up to 13 consecutive overnight passes to a location approved by the health care team, or discharge from the hospital

**What are your questions?**

**Please ask. We are here to help you.**

## **AWOL (Absent Without Leave)**

You are considered AWOL if:

- › You do not follow your itinerary.
- › You make changes to your itinerary without contacting the unit.
- › You do not return from your pass on time.
- **You must be back on the unit before your pass ends.**
  - › Make sure you have enough travel time in case traffic or weather causes delays.
  - › Make sure you have enough time to be searched by correctional officers before entering the unit.
  - › **Always contact the unit if you think you may be late.**

**If you are called AWOL:**

- › We will contact the police and ask them to find you and bring you back to the ECFH.
- › A media release may be sent to help find you.
- › When you return to the ECFH, your community access will be placed on hold for at least 72 hours (3 days).
- › Your health care team will go over why you went AWOL and what happened while you were away from the hospital. This information will be given to management for review.
- › The CCRB will be told of the AWOL.
- › Your health care team may decide to lower your community access level based on the events of the AWOL.

## **Conditional discharge**

- The CCRB may give you a conditional discharge (you are free to go), but you may not be able to leave right away. It will list the orders you must follow for a certain length of time to live in the community. For more information, visit:
  - › [https://novascotia.ca/just/ccrb/ccrb\\_overview.asp](https://novascotia.ca/just/ccrb/ccrb_overview.asp)
- **This does not mean you will be discharged on the day of your hearing.**
- Together with your health care team, you will start to plan for your return to the community. Before leaving the ECFH, you will need a suitable place to live with supports in place.

- A member of your health care team will meet with you on a regular basis to make sure you are following the conditions set by the CCRB. Please see the *Community Client Program Guide*, for more details.

## **Absolute discharge**

The CCRB may give you an **absolute discharge (you are free to go)**. This often happens when a patient has gone back to living in the community and is doing well. When you are given an absolute discharge, you will no longer be followed by your ECFH health care team or hospital staff. Your health care team will connect you with **community-based supports** as needed.

## **Rehab units**

### **What you can expect FROM your health care team**

- Members of your health care team will help you to meet your goals and work towards recovery.
- Nursing staff are available at all times (24/7) to provide care and help you meet your physical and mental health needs.
- You will be able to take part in programs in the hospital, and members of your health care team will help you find programming in the community that interests you.
- When you are given a conditional discharge, your health care team will help you with discharge planning and connecting with community resources to meet your needs.

## What your treatment team will expect FROM you

You will be expected to:

- › take part in rehabilitation activities.
- › meet with members of your health care team and attend team meetings.
- › be respectful to staff and other patients.
- › keep your bedroom clean and free from clutter.
- › keep your personal belongings in your bedroom.
- › keep common living spaces clean and tidy.
- › keep good personal cleanliness.
- › take your medications as prescribed.
- › respect the privacy and personal belongings of others. **Do not go into other dayrooms and/or bedrooms.**
- › help keep the units safe by not taking part in arguments (fights) and reporting them to staff.
- › **not** use aggressive words or actions. If you have concerns or an argument with another patient, talk with nursing staff.
- › **not** be violent towards other people or property.
- › **not** use alcohol, cannabis, synthetic (man-made) cannabis, other illegal drugs, or non-prescribed medication(s).
- › talk with staff if you have concerns.
- › follow the orders of staff and all unit rules and hospital policies.

Meeting these expectations will help your time in the ECFH go smoothly and prevent delays in discharge.

**Please note: changes to these guidelines and expectations can be made to manage risk.**

## Rehab routine

There are daily quiet times to support your wellness. You will need to stay in **your dayroom** during these times:

- › 12:30 to 1:30 p.m.
- › 6 to 7:30 p.m.
- › 10 p.m. to 7:30 a.m.

## Meals

There is a common dining space on each unit. Meals and coffee breaks are at:  
Breakfast:

- › 8 to 8:30 a.m.

Morning break:

- › 10:30 to 10:45 a.m.

Lunch:

- › 11:30 a.m. to 12:30 p.m.

Afternoon break:

- › 2:30 to 2:45 p.m.

Supper:

- › 4:30 to 5:30 p.m.

Night lunch:

- › 8 to 8:15 p.m.

## Phone

There is a payphone in each dayroom. Staff do not answer the payphones, so please stay in the area if you are expecting a call. **Personal cell phones are not allowed on the units.**

## Laundry room

There is a washer, dryer, and laundry detergent on each unit. You are in charge of washing your own clothes. Check with nursing staff to find out which day you may use the laundry room. Ask staff if you need help using the machines.

## Visitors

When you are moved to a Rehab unit, your health care team will decide if it is better for you to have non-contact or contact visits with your family and friends.

### Non-contact visits

- Non-contact visits are booked for 30 minutes (half an hour), depending on how many visitors are booked that day. All visitors must show a picture government ID (identification) to Reception or Master Control (security) when they arrive at the ECFH.
- Visits take place in the non-contact room. You will be separated from your visitor by a secure window. You will be able to talk to them using a phone.

### Contact visits

- The ECFH has two (2) contact visit rooms which are watched by a video camera.
- Contact visits are booked for 60 minutes (1 hour).
- All visitors must show a picture government ID to Reception or Master Control when they arrive at the ECFH.
- Your visitor will be asked to lock their belongings (coat, purse, bag, keys, etc.) in a locker in the lobby. Reception will give your visitor a lock.
- **Your visitor cannot bring food or drinks into the visit room.**
- **If there is any inappropriate behaviour, the visit will end, right away.** This includes sexual behaviour, passing objects not searched by correctional officers, arguing or fighting, and other upsetting behaviour.

Non-contact and contact visits can be booked from:

- › 9 a.m. to noon
- › 1 to 6 p.m.
- › 7 to 9 p.m.

**Visits must be booked 24 hours (1 day) in advance.** You can book by calling the ECFH switchboard at 902-460-7300.

## Smoking

- **Smoking is not allowed in the ECFH or on the hospital grounds.**
- Patients in the Rehab units are allowed to smoke in the smoking area at certain times.
- For the safety and health of patients and staff, patients may only be given factory-sealed packages of tobacco products.

## Trust fund

- The ECFH has a trust fund where you can set up an account, like a bank. You can deposit and withdraw money while you are in the hospital.
- **You may add to your trust fund account using cash, a money order, or a certified cheque.** You will be able to cash your government-issued Income Assistance and GST/HST rebate cheques.
- **We do not accept funds by electronic fund transfer or personal cheque.**
- Family and friends may also add to your trust fund account. Please talk with the receptionist to have money added to your account.
- Hours:
  - › Monday to Friday, 2 to 4 p.m.

## Canteen and apparel shop

- Occupational Therapy runs a weekly canteen that you can use.
- They also run an apparel shop. Items are free of charge. If you need items from the apparel shop, nursing staff will fill out a form for you. Clothing at the shop changes, but includes shirts, pants, jackets, and shoes.
- Note: The canteen is based on staff availability and may be cancelled on short notice.

## Personal items

- You can have personal items while you are on a Rehab unit. For safety, we ask that you do not have more items than you need. You may have the following items in your dayroom:
  - › **7 days (1 week) worth of clothing**
  - › 3 pairs of footwear (not steel toe)
  - › Jewelry/accessories, no more than needed
  - › Unscented personal hygiene products (Nova Scotia Health is scent-free. Do not use scented products.)
  - › Toothbrush, comb, hairbrush
  - › Alarm clock or radio
  - › MP3 player (no audio and/or video recording abilities)
  - › Headphones or ear buds
  - › 10 books
  - › 10 CDs or DVDs
  - › Backpack or overnight bag
  - › Wallet or purse

- You may have the following items that nursing staff will store for you:
  - › Razors, shaving cream
  - › Hair clippers, electric razors
  - › Nail clippers
  - › Makeup or nail polish in glass containers
  - › Curling iron, flat iron, hair dryer
  - › Hygiene products in aerosol (spray) cans
- Your health care team will decide if you may have personal electronics on the unit, such as:
  - › iPad or tablet
  - › Laptop
  - › Video gaming system and TV
- You will be asked to review and sign a *Code of Conduct to Use Personal Electronics*. This document is in your orientation package.
- **Personal cell phones are not allowed on the units.**

## Safety

- Patient and staff safety is very important at the ECFH. Correctional officers help to keep the ECFH safe. Physical and verbal aggression towards yourself or others is not allowed. If it happens, it will be dealt with by staff with support from correctional officers.
- There is an intercom panel connected with the Master Control (security office) in each room. If you are in distress and are not able to reach nursing staff, press the intercom button and you will **be connected with** the Master Control. If you are distressed by another patient's behaviour, please talk with staff.

## Privacy

- To respect the privacy of everyone on the unit, **do not take photos or audio and/or video recordings of patients or staff**. This is part of the *Code of Conduct to Use Personal Electronics*. If you do not follow the Code of Conduct, you will lose the privilege to use personal electronics.
- Respect other patient's privacy by not talking about them.
- The *Overview of Information Sharing and Confidentiality With the Circle of Support* document in your orientation package explains how your personal health information may be shared with others.



## **Contraband (not allowed) items**

- The ECFH aims to provide a safe environment for the rehabilitation and recovery of patients, and for ECFH staff and the public. Any item that may be a risk to the safety and security of patients, staff, or the public is contraband. **If you are found with a contraband item, there may be changes to your community access.** Examples of contraband include:
  - › Weapons and any items changed to be used as weapons
  - › Alcohol, cannabis, synthetic cannabis, other illegal drugs, and non-prescribed medications
  - › Tobacco products and other smoking materials (such as lighters, matches, e-cigarettes, vape pens, etc.) which have not been approved by ECFH staff
  - › A patient's personal or facility-issued items found in the possession of another patient

## **Patient feedback**

- If you wish to share a compliment or concern about the service you have been given, please talk with staff or ask to talk with the Health Services Manager.
- You may also contact the Nova Scotia Health Patient Feedback Line:
  - › Phone (toll-free): 1-844-884-4277

## **Community supports**

### **NS Health Adult Community Mental Health and Addictions Services**

- › Intake line (toll-free): 1-855-922-1122  
(Monday to Friday, 8:30 a.m. to 4:30 p.m.)
- › <https://mha.nshealth.ca/en/services/adult-community-mental-health-and-addictions-services>

### **Healthy Minds Cooperative**

- › Phone: 902-404-3504
- › Email: [healthyminds@eastlink.ca](mailto:healthyminds@eastlink.ca)
- › [www.healthyminds.ca](http://www.healthyminds.ca)

### **Nova Scotia 211**

- › Phone: 211
- › Email: [help@ns211.ca](mailto:help@ns211.ca)
- › [www.ns.211.ca](http://www.ns.211.ca)

This pamphlet is just a guide. If you have questions, please talk to your health care provider. We are here to help you.

# Notes:

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**Looking for more health information?**

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

*Nova Scotia Health promotes a smoke-free, vape-free, and scent-free environment.*

*Please do not use perfumed products. Thank you!*

[www.nshealth.ca](http://www.nshealth.ca)

*Prepared by: East Coast Forensic Hospital*

*Designed by: Nova Scotia Health Library Services*

The information in this brochure is for informational and educational purposes only.

The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider.