



## Patient Belongings

### DEFINITIONS

- **Valuables:** a negotiable item such as cash, credit cards, wallet, cell phone, driver's license and jewelry
- **Belongings:** Any item such as clothing, reading materials, personal items such as dentures, retainers, eyeglasses, hearing aids, canes and walkers.
- **Contraband:** Potentially harmful objects or materials which are not allowed on the premises of Sonora Behavioral Hospital

#### A. Contraband:

1. All valuables is to be sent home at the time of admission or picked up by a trusted friend or family member as soon as possible. Valuables not sent home will be in a safe bag and not accessible during your visit.
2. **Items that are never permitted are:**
  - a. All glass, metal or ceramic objects
  - b. All sharp objects, whether metal, wire or hard plastic including tweezers, scissors, knives, hair picks, barrettes, hair clips/pins, razors, nail clippers, spiral notebooks, hangers, sewing/knitting needles, hooks, guns, letter openers, nail files or other items identified.
  - c. Any electronic items including CD players, I pads, cell phones, I PODS, electric toothbrushes, radios, tapes, CD's. Computers, batteries, hair dryers, curling irons, flat irons and anything with an electric cord.
  - d. Aerosols or sprays
  - e. Personal hygiene articles containing alcohol including mouthwash and hand sanitizer products.
  - f. Any smoking materials tobacco, matches, lighters, pipes or paraphernalia
  - g. Sonora provides food and drink while you are here We cannot allow outside food into the hospital
  - h. Staples and materials with staples are not permitted
  - i. Belts, shoe laces, cloth sashes, handkerchiefs, scarves, cord strung clothing of any kind, drawstrings suspenders, head bands and hairbands, Underwire bras are not permitted. Clothing that is not permitted includes halter tops, low cut necklines, spaghetti straps, short shorts, mid drift tops, spandex and no metal zippers or hoodies
  - j. Stuffed animals, blankets personal pillow or any bedding is not permitted on the units
  - k. Sonora provides pencils, crayons and markers while you are here
  - l. Alcohol or illegal drugs
  - m. Clothing that glorifies drugs, alcohol, cigarettes, pornography, gangs or violence.
  - n. Hats, skull caps, bandannas or bandannas or hoodies
  - o. Weapons or firearms
  - p. Plastic bags, or bags with handles or long straps

- q. Money of any kind
- r. Dental floss,, rope or twine
- s. Backpacks

### **3. Limited access list**

- a. Jewelry that cannot be removed from your body ( includes piercings)
- b. Over the counter medications, prescribed by your doctor and properly labeled may be used at Sonora. Our pharmacist will determine eligibility
- c. Any sunglasses – must be prescription
- d. Personal reading books are not recommended

**Our number one goal is to keep you safe here at Sonora!**

**Thank you for helping us keep you and other patients safe**



## **Permissible Patient Belongings List**

### **Clothing**

- 3 Outfits
  - \*1 outfit includes 1 top, 1 bottom, 1 undergarment and 1 pair of socks
- 1 Pair of Pajamas
- 1 Pair of shoes without laces
- 1 Sweatshirt or Jacket
  - \*\*\* Drawstrings, hoods and metal pieces are not permitted on any clothing item

### **Toiletries**

- All items must be unopened and may not include alcohol as the main ingredient

### **Miscellaneous**

- Notebooks without staples or spiral binding
- Books ( paperbacks only)
- Hairbrush or /Comb
- 1-2 small hair ties without metal



## CONTACT

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### PHONE

Main: (520) 469-8700

Admissions Team: (520) 229-8400

### WEBSITE

[www.SonoraBehavioral.com](http://www.SonoraBehavioral.com)

Welcome to Sonora Behavioral Health Hospital!

Sonora Behavioral Health Hospital understands that you may feel concerned and even a bit anxious about viruses such as COVID-19. We want to assure you that Sonora Behavioral Health Hospital is prepared to keep you and/or your family member safe. We are committed to patient/resident and staff safety and want to share what we are doing to help prevent the spread of highly infectious illness, such as COVID-19.

The following strategies have been implemented, as recommended by the Centers for Disease Control (CDC) and World Health Organization (WHO):

- Patient and employee screening for temperature and symptoms prior to admission
- Temperature checks and symptom monitoring for anyone coming in the building, including staff and vendors
- Temperature checks and symptom monitoring of patients daily
- Restrictions on visitation policies
- Masks provided for patients, if appropriate, after a clinical and medical risk screening
- Universal masking for all staff including administrative and dietary personnel
- Enhanced cleaning and disinfecting protocols for all areas of the facility, including transportation vehicles, recreation equipment, and other frequently touched surfaces
- Enforcement of frequent hand hygiene practices
- Social Distancing measures such as spacing patient furniture 6 feet apart in areas such as courtyards, group and day rooms
- Modification of the dining areas to ensure social distancing (tables and chairs 6 feet apart), staggering mealtimes, social distancing while in the meal line

Please feel free to contact any member of your treatment team with any further questions or concerns.

Respectfully Submitted,

SBH Leadership



# Symptoms of Coronavirus (COVID-19)

**Know the symptoms of COVID-19, which can include the following:**



**Symptoms can range from mild to severe illness, and appear 2–14 days after you are exposed to the virus that causes COVID-19.**

## **Seek medical care immediately if someone has Emergency Warning Signs of COVID-19**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone

This list is not all possible symptoms. Please call your healthcare provider for any other symptoms that are severe or concerning to you.



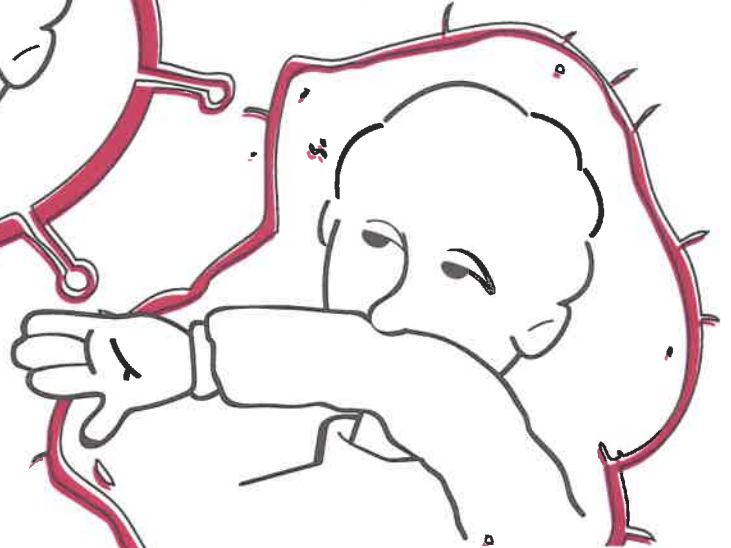
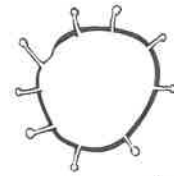
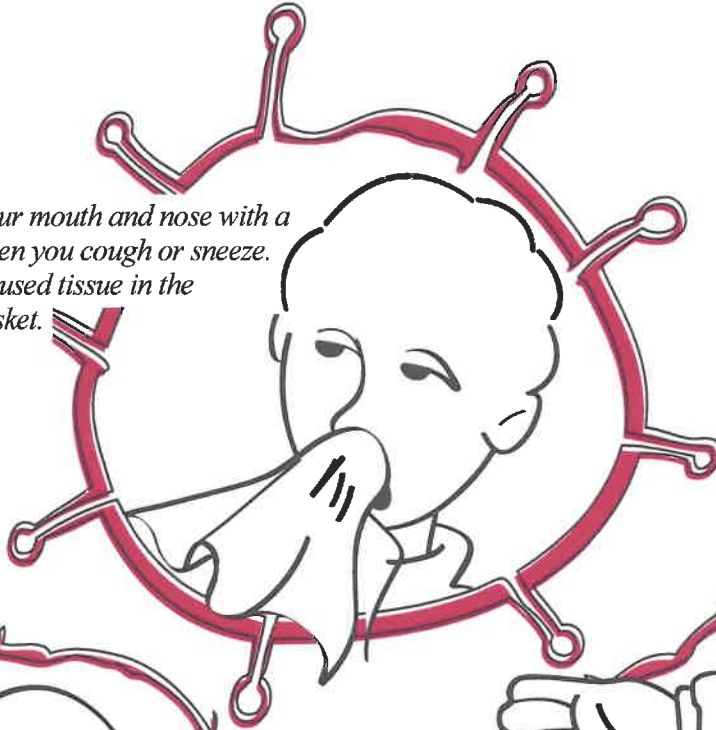
**Centers for Disease  
Control and Prevention**  
National Center for Emerging and  
Zoonotic Infectious Diseases

**[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)**

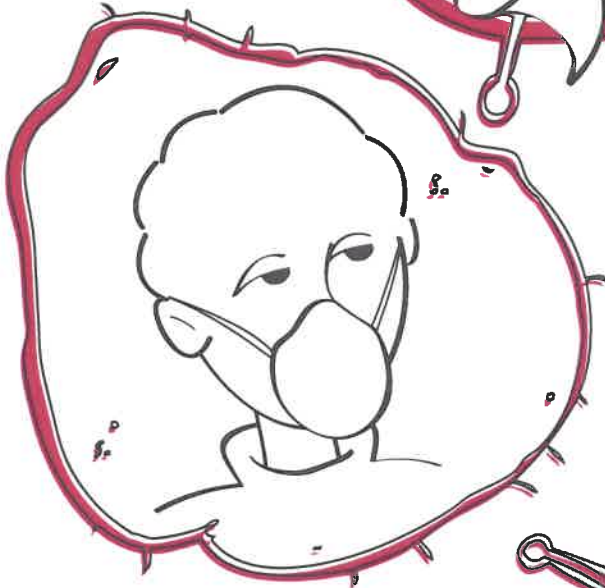
# Cover Cough

*Stop the spread of germs that can make you and others sick!*

*Cover your mouth and nose with a tissue when you cough or sneeze. Put your used tissue in the waste basket.*



*If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.*



*You may be asked to put on a facemask to protect others.*



*Wash hands often with soap and warm water for 20 seconds. If soap and water are not available, use an alcohol-based hand rub.*







**COVER MOUTH AND NOSE**



**CLEAN HANDS**

## **Cover Coughs and Sneezes. Clean Hands.**

Be a germ stopper at school — and home. Cover your mouth and nose when you cough or sneeze. Use a tissue and throw it away.

### **Clean your hands a lot**

- After you sneeze or cough
- After using the bathroom
- Before you eat
- Before you touch your eyes, mouth or nose

**Washing hands with soap and water is best.** Wash long enough to sing the "Happy Birthday" song twice. Or, use gels or wipes with alcohol in them. This alcohol kills germs!

**Stop germs. And stop colds and flu.**

[www.cdc.gov/germstopper](http://www.cdc.gov/germstopper)





### **Notice to Guardians**

Please be advised that the Arizona Center for Disability Law may visit our facility from time to time. ACDL is the federally mandated Protection and Advocacy System (P&A) for the State of Arizona. Congress created the P&A System to monitor compliance with respect to the rights and safety of residents, and provide information and training about individual rights and the P&A System. ACDL may visit our facility for monitoring purposes, which simply means that they will tour our facility, talk with residents and staff, and observe the general atmosphere of our facility. Sonora Behavioral Health Hospital and ACDL want to ensure that the parents and guardians of the individuals in the care of the facility are informed that the P&A will be conducting these monitoring activities and, in the course of such monitoring, may speak informally to those with legal guardian. If you have any questions concerning ACDL or its monitoring activities, you may contact them at (800)927-8860 (toll free) or at [www.azdisabilitylaw.org](http://www.azdisabilitylaw.org).





**SONORA**  
BEHAVIORAL HEALTH

### **CONFIDENTIALITY**

All information regarding patients and their families and Sonora Hospital business must be kept strictly confidential in accordance with local, state and Federal laws and health care standards. Your information may be discussed only with those individuals directly involved with patient care or hospital business practice. You also have the right to receive, or refuse to receive visitors. All visitors review the confidentiality statement and are requested to observe strict confidentiality. Visitors once permitted acknowledge notification and agreement to uphold confidentiality.

If you family or friends attempt to call you here, please keep in mind that staff in the reception area or on the units cannot disclose whether or not you are at Sonora. Due to HIPAA regulations, **We cannot confirm or deny whether or not you are at Sonora, Please inform your family and friends of this legal regulation in advance of them attempting to call.** You can have a caller leave a message and you can return their calls at the designated phone times. Staff members never ensure that you will return the call if you are here, that is your choice.

If you want us to be able to give information about you to anyone other than those automatically allowable by law, it will be necessary for you to complete and sign a release of Information form, or ROI.

No medical records will be released until after your discharge to you, family or friends. This request needs to be done through our medical records department.



## **The use of seclusion and restraint**

Seclusion is an emergency therapeutic measure that is occasionally utilized only to prevent a patient from causing physical harm to self or others. This procedure is used only after ALL other methods of de-escalation and defusing of the situation has failed and the patient continues to present danger to themselves or others.

Use of seclusion means placing you alone in a safe room from which you have no other means of leaving physically or verbally stopped from leaving.

The use of restraints means restricting the movement of your limbs and body by a physical hold. This is only authorized following an assessment by the RN or physician that you are unable to regain control, or that your safety or that of others cannot be ensured through any less restrictive measures. The use of a chemical restraint is used for the same purpose of safety, and can only be by a physician's order.

The use of either seclusion or restraint is a temporary emergency measure only and is not ever done as a punishment or retaliation, or for the convenience of the staff. All safety precautions are followed at all times, and every effort is made to ensure your privacy.

You will be given a de-briefing opportunity afterward to discuss what could have been done differently to assist you in regaining control, prior to resorting to a seclusion or restraint.

Our number one goal is to ensure your safety while you are here at Sonora Behavioral Health Hospital.



## **Patient and Family Grievances**

Patients have the right to submit grievances to Sonora staff members and complaints to outside entities and other individuals without constraint or retaliation. Sonora will consider grievances in a fair, timely and impartial manner.

Patients and family have an avenue to submit or participate in the complaint process and compliance with licensure regulations and Section 504 of the Rehabilitation act of 1973 (29 U.S.C. 794).

The definition of a patient grievance is defined as those issues presented by patients, family members, staff and or visitors that due to their very nature require the attention by staff members to resolve the issue. Issues that cannot be resolved by staff members on an immediate basis and need further review of staff involvement will be considered a grievance.

Sonora has appointed a patient advocate to review grievances in a fair and timely and impartial manner. The patient advocate can be reached by calling 2915 within the hospital. The patient Advocate telephone number is also posted on the units.

Patient concerns regarding Quality of Care or premature discharge may be referred to the appropriate Utilization and Quality of Control, Quality improvement Organization/QIO by the patient advocate /designee within 24 hours.

All patient grievances will be investigated and the results of the investigation reported back to the complainant. Patient's grievances will be reviewed as soon as the grievance is completed and if at all possible resolved by staff at that time. Patients who are unable to complete the grievance form will be assisted. Patients who refuse to complete the form will have their issues documented for by staff members and the grievance form approved by the patient.

Sonora shall not discharge patients from care or discriminate against them in any way for participating in a complaint to the Arizona Department of Health Services, Office of Behavioral Health Licensure, The joint Commission or 504 Section Coordinator. Patient Rights and contact phone numbers are clearly displayed in patient access areas as important phone numbers. Presentation of a complaint does not comprise a patient's' future access to care



### PATIENT CONCERN NOTIFICATION

We try to make every part of your treatment as comfortable as possible. We understand that issues may arise that you become aware of before we do, and urge you to report any concerns or complaints to a staff member. If you think your concerns have not been addressed appropriately OR if you are more comfortable reporting them in writing, please use the space below. Include any individuals involved and be as specific as possible, especially if you feel that any patient rights may have been violated. Staff will help you complete the form if you need assistance.

Name (Optional) \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Unit: \_\_\_\_\_

Concern/Complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Return this to any staff member. Thank you for allowing us an opportunity to improve the quality of care we provide to our patients.

\_\_\_\_\_

Disposition: (Staff Use Only)

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

Staff Name & Title who addressed the concern immediately: \_\_\_\_\_

Actions taken to resolve concern by staff present: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the patient report the concern is resolved? \_\_\_\_\_ Yes \_\_\_\_\_ No

**ROUTED TO PATIENT ADVOCATE IMMEDIATELY**

Revised 10/27/2020

# PHONE CALL GUIDELINES



## **When calling you must provide the Patient Code:**

Staff cannot confirm admission or transfer caller without this code due to HIPAA Privacy laws



## **Loved ones may call to speak to a Nurse anytime between:**

9:00 am – 9:00 pm



## **To speak to your loved one you may call, or loved one may call you, during “Relaxation” and Break Times”:**

Times vary by Unit



## **Calls are limited to 10 minutes:**

Unless otherwise permitted by Nurse/Doctor



## **A Nurse may terminate calls if the call is no longer therapeutic:**

Please keep phone call calm and relaxing





## Important Phone Numbers

<p><b>Sonora Behavioral Health</b> 6050 N. Corona Rd Tucson, AZ 85704 Phone: (520) 469-8700</p>	<p><b>Patient Advocate</b> Phone: (520) 469-8700 ext. 2915</p> <p><b>Outpatient Services</b> Phone: (520) 276-1199 3130 E. Broadway, Suite 196 Tucson, AZ 85716</p>
<p><b>Arizona Department of Health Services</b> <b>Phoenix Main Office</b> 150 N. 18<sup>th</sup> Ave., Suite 400 Phoenix AZ 85007 (602) 542-1025</p> <p><b>Tucson Office</b> 400 W Congress, Suite 100 Tucson, AZ 85701</p>	<p><b>Vital Records</b> Phone: (602) 364-1300</p> <p><b>Medical Facilities Licensing</b> Phone: (602) 364-3030 Email: <a href="mailto:Medical.Licensing@azdhs.gov">Medical.Licensing@azdhs.gov</a></p>
<p><b>AHCCCS</b> 801 E Jefferson St. Phoenix, AZ 85034 Phone: (602) 417-4000 In-State Toll Free: 1-800-654-8713</p>	<p><b>Office of Human Rights</b> 400 W. Congress St., Suite 118 Tucson, AZ 85701 Phone: (520) 770-3100 Email: <a href="mailto:OHRts@azahcccs.gov">OHRts@azahcccs.gov</a></p> <p><b>Arizona Complete Health</b> 333 E Wetmore Rd, #500 Tucson, AZ 85705 Phone: (866) 495-6738</p>
<p><b>Department of Economic Security</b> 400 W. Congress Tucson, AZ 85701 Phone: (520) 628-6810</p>	<p><b>Arizona Department of Child Safety</b> 3550 N. Oracle Rd Tucson, AZ 85705 Phone: (520) 8877577</p> <p><b>Arizona Adult Protective Services</b> 1789 W. Jefferson St. Phoenix, AZ 85007 Phone: (602) 542-0010</p>



## Contactos Importantes

<p><b>Sonora Behavioral Health</b> 6050 N. Corona Rd Tucson, AZ 85704 Teléfono: (520) 469-8700</p>	<p><b>Defensor del Paciente</b> Phone: (520) 469-8700 ext. 2915</p> <p><b>Servicios Externos</b> Teléfono: (520) 276-1199 3130 E. Broadway, Suite 196 Tucson, AZ 85716</p>
<p><b>Departamento de Servicios de Salud de Arizona</b> <b>Oficina principal de Phoenix</b> 150 N. 18<sup>th</sup> Ave., Suite 400 Phoenix AZ 85007 Teléfono: (602) 542-1025</p> <p><b>Oficina de Tucson</b> 400 W Congress, Suite 100 Tucson, AZ 85701</p>	<p><b>Registros Vitales</b> Phone: (602) 364-1300</p> <p><b>Licencias de Instalaciones Médicas</b> Teléfono: (602) 364-3030 Correo electrónico: <a href="mailto:Medical.Licensing@azdhs.gov">Medical.Licensing@azdhs.gov</a></p>
<p><b>AHCCCS</b> 801 E Jefferson St. Phoenix, AZ 85034 Teléfono: (602) 417-4000 Llamada gratuita en el estado: 1-800-654-8713</p>	<p><b>Oficina de Derechos Humanos</b> 400 W. Congress St., Suite 118 Tucson, AZ 85701 Teléfono: (520) 770-3100 Correo electrónico: <a href="mailto:OHRts@azahcccs.gov">OHRts@azahcccs.gov</a></p> <p><b>Arizona Complete Health</b> 333 E Wetmore Rd, #500 Tucson, AZ 85705 Teléfono: (866) 495-6738</p>
<p><b>Departamento de Seguridad Economica</b> 400 W. Congress Tucson, AZ 85701 Teléfono: (520) 628-6810</p>	<p><b>Departamento de Seguridad Infantil de Arizona</b> 3550 N. Oracle Rd Tucson, AZ 85705 Teléfono: (520) 8877577</p> <p><b>Servicios de Protección Para Adultos de Arizona</b> 1789 W. Jefferson St. Phoenix, AZ 85007 Teléfono: (602) 542-0010</p>



## **Patients' Rights**

### **A. An administrator shall ensure that:**

1. The requirements in subsection (B) and the patients' rights in subsection (C) are conspicuously posted on the hospital's premises
2. At the time of admission, a patient or the patient's representative receives a written copy of the requirements in subsection (B) and the patient's rights in subsection (C)
3. Policies and procedures include:
  - a. How and when a patient's representative is informed of patient rights in subsection (C)
  - b. Patients' rights are posted as required in sub-section (A) (1)

### **B. An administrator shall ensure that:**

1. A patient is treated with dignity, respect and consideration
2. A patient is not subject to:
  - a. Abuse
  - b. Neglect
  - c. Exploitation
  - d. Coercion
  - e. Manipulation
  - f. Sexual abuse
  - g. Sexual assault
  - h. Seclusion except allowed under R9-10-217 or R0-10-225
  - i. Restraint, if not necessary to prevent imminent harm to self or others or as allowed under R-10-225
  - j. Retaliation for submitting a complaint to the Department or another entity
  - k. Misappropriation of personal or private property by a hospital's medical staff, personnel members, employees, volunteers or students
3. A patient or the patients representative can:
  - a. Except in an emergency situation , either consent or refuses treatment
  - b. May refuse examination of withdraw consent for treatment before
  - c. treatment is initiated Is informed of
    - i. Except in an emergency, alternatives to a proposed psychotropic medication or procedure and associated risks and possible complications of the proposed medication or procedure

- ii. How to obtain a schedule of hospital rates and charges required in A.R.S 36-436 .01 (B)
  - iii. Except as authorized by Health Insurance Portability and Accountability Act of 1996, proposed involvement of the patient in research, experimentation, or education, if applicable.
- d. Except in an emergency, is provided a description of the health care directives policies and procedures:
  - i. If an inpatient, at the time of admission
  - ii. If an outpatient
- e. Consents to photographs of the patient before the patient is photographed, except that a patient maybe photographed when admitted to a hospital for identification purposes and administrative purposes.
- f. Except as otherwise permitted by law, providers written consent to the release of information in the patients:
  - i. Medical record
  - ii. Financial records

**C. A patient has the following rights:**

1. *Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status or diagnosis*
2. *To receive treatment that supports and respects the patient's individuality, choices, strengths and abilities.*
3. *To receive privacy in treatment and care for personal needs*
4. *To have access to a phone*
5. *To review upon written request, the patient's own medical record according to A.R.S. 12-2293, 12-2294 and 12-2294.01*
6. *To receive a referral to another health care institution if the hospital is not authorized or not able to provide physical health services or behavioral health services needed by the patient*
7. *To participate or have patients representative participate in the development of, or decisions concerning treatment*
8. *To participate or refuse to participate in research or experimental treatments*
9. *To receive assistance from a family member, representative or other individual in understanding protecting or exercising the patients' rights*

**PATIENTS RESPONSIBILITIES**

Each Patient and or their legal guardian are responsible for:

**A. Provision of Information**

1. Providing to the best of the patients knowledge, accurate and complete information about present medical and psychiatric conditions, disabilities, allergies, current

medications, current use of licit or illicit substances, past illnesses, hospitalizations, existing advance directives, and other matters relating to patient health

2. Indicating the level of patient understanding of the information provided during the course of treatment and requesting clarification when necessary
3. Acknowledging understanding of proposed treatment options and their expected outcomes, unexpected outcomes, risks and benefits
4. Informing the treatment team of an interpreter or communication services/devices used by the patient on a routine basis; attempts may be made to access the patients personal interpreter or communication services to facilitate treatment and to create an overall comfort level for the patient
5. Providing information regarding the patients religious, spiritual, or other types of belief systems that may conflict with the provision of some or all aspects of treatment

**B. Being an Active Member of the treatment Process**

1. Providing input into the treatment plan and working with the treatment team to meet established goals
2. Working cooperatively with the physician, charge nurse and other treatment team members
3. Voicing disagreement about proposed treatment options in a manner that is respectful and conducive to working as a team
4. Adhering to applicable policies and procedures. Examples of policies and procedures that may impact the patient are those pertaining to visitation, smoking, contraband, grievance resolution, and confidentiality
5. Taking prescribed medications and following all other aspects of the treatment plan, as agreed upon with the physician and treatment team. Modifications to the treatment plan can be made during routine reviews or as determined needed.

**C. Safety and the therapeutic Environment**

1. Communicating and functioning in a manner that is free from violence, risk to others or self, or otherwise could place others or the treatment setting at risk for harm/accident
2. Communicating and functioning in a manner that is considerate of other patients staff members, allied professionals and visitors; voices are to remain at a level that allows others to hold conversations comfortably and to promote privacy
3. Taking medications as prescribed, and for not giving prescribed medications to others; allergy or other adverse reactions can occur, and the patient giving the medication to others will be held responsible
4. Reporting any contraband found or brought into the facility to a Sonora staff member immediately

**D. Respect and consideration for others**



1. Being considerate of the rights of other patients, staff members, allied professionals and visitors
2. Engaging in respectful interactions with other patients, staff members, allied professionals and visitors
3. Refraining from the use of derogatory, obscene or otherwise offensive language and gestures
4. Attending to the basic, personal hygiene on a daily basis; staff can assist with activities related to hygiene
5. Refrain from physical contact with other patients, staff members, allied professionals, and visitors. **YOU COULD BE CHARGED WITH A FELONY UNDER THE ARIZONA REVISED STATUTE FOR AGGRAVATED ASSAULT FOR ASSAULTING A SONORA BEHAVIORAL HEALTH WORKFORCE MEMBER ( healthcare Worker) A. R.S. 13-1294 (A) (8) €.**
6. Resolving conflicts or disagreements in a mature and respectful manner; refraining from any use of physical aggression.

**E. Refusal of Treatment**

1. The outcome of treatment if the patient refuses to participate in the critical aspects of the treatment plan or refuses to follow the practitioners instructions that are critical to the achievement of treatment objectives
2. Identifying alternative types and sources of treatment that the patient feels comfortable with

**F. Fees and Charges**

1. Ensuring that any financial obligations incurred are fulfilled promptly
2. Seeking information pertaining to benefit and payment options in an effort to fulfill the financial obligation in a timely manner.