

# Young Person Handbook Adolescent Unit

Version 2 – May 2024

Riverdale Grange, 93 Riverdale Road, Sheffield, S10 3FE

0114 2302140  
[info@riverdalegrange.co.uk](mailto:info@riverdalegrange.co.uk)



# Welcome to Riverdale Specialist Eating Disorders Hospital

Riverdale is a specialist service for the treatment of young people (aged 12-18 years) with eating disorders. You will probably have come here because you need more help with your eating disorder than you can get in your local area. The treatment is aimed overall to help you move away from your eating disorders and deal with difficulties in a healthier way. This will enable you to get back to living your life without eating difficulties and help you to take part in the things that you want to do such as school or college, family life and spending time with friends. The treatment provided is individual to you and will focus on the following areas:

## Gaining more control over your illness

A range of psychological treatments including Family Therapy and Cognitive Behaviour Therapy (CBT) are available as a way of helping you to understand your illness and find ways of managing your eating disorder.

## Weight restoration

We will provide you with an individual meal plan and support you to change your current eating behaviours (e.g. restricted eating, vomiting etc.) so your weight can be restored to support your health and development.

## Returning to normal life

Your clinical team will help you to return to aspects of normal life (e.g. school and family). This is achieved by starting to spend time at home from early in your admission and helping your family learn how to support you. We aim to work in partnership with you. We recognise that getting well is helped by us working together with you, your family and your local Community Mental Health Team (CAMHS).

## Hospital Ethos and Values

We understand that you may have mixed feelings about having an eating disorder and that change is both hard and can be frightening. We provide a warm and friendly environment with lots of support to help you feel more confident about change. We value what you have to say and will work with you to plan your treatment.

## Our mission

- To put young people and their family's needs first
- To provide the highest possible standards of care
- To treat patients with respect and dignity
- To promote a positive approach to recovery
- To promote and support patients in making informed choices
- To place importance on valuing each patient as an individual and to ensure maximum opportunities for personal growth and development
- To provide an environment where all staff are valued and every person is treated equally and with respect.

## Dignity and Respect

We will always ask your permission prior to planned physical contact by staff e.g. when doctors or nurses carry out a physical examination. We often have medical students, nurses, doctors and other multi-disciplinary staff training with us on the unit. It is important for them to be present for things like physical examinations, ward rounds or care review meetings as part of their training; however, we would always ask you permission prior to this happening.

## Our expectations of all young people admitted to Riverdale

- To be respectful to all
- To be tolerant of others' difficulties.
- No bullying, sexism, racism, homophobia and any other forms of discrimination.
- Not to act in a violent or aggressive manner, verbally or physically.
- Not to bring items on to the unit that may cause harm for example; alcohol, drugs, cigarettes, items which could be used to harm either yourself or others.
- To work with all staff to meet your planned care and access all opportunities available.

## What young people and families can expect from the Riverdale team

- A kind, caring, non-judgemental approach.
- A family-based approach
- Professionalism, openness, integrity and honesty.
- Genuine interest in providing treatment.
- Striving for improvements by listening to and acting on feedback.
- Confidentiality and respect.
- A high level of skill and knowledge in the delivery of eating disorder treatment.

## What To Expect

### Day of Admission

A nurse will lead your admission and guide you through the process, which will include:

- We will show you to your room and carry out a property check, staff will take any sharp items and keep them in the nurse's office. Electrical items will need to be PAT tested to ensure they are safe to use.
- You will be shown around the building and staff will highlight the fire exits.
- You will be met by a GP, within 4 hours of your admission.
- You will meet with a Dietician, who will assess any dislikes and dietary needs.
- A nurse will do a risk assessment with you and talk through any safety issues.
- You will be put on certain levels of observation for the first few days, as explained on the next page.

## What to bring with you?

All you need to bring is clothing, nightwear, toiletries, slippers and items to keep yourself busy with (e.g. magazines, books, puzzle books). Please do not bring in large amounts of money or expensive items as the unit cannot be responsible if these are lost or broken. There is no particular need for money in the early phases of treatment. On admission all your property will be checked in your presence to make sure that you don't have access to anything which may cause you or others harm.

### The following items are not allowed for the safety of you and others:

- Any sharp items. This includes things like as razors, tweezers, pencil sharpeners. If you bring any of these items into the hospital they may be removed and held by staff on your behalf and given to you when you request them or under supervision if this is part of your care plan.
- Any medication, this does include laxatives, pain killers and diuretics. If you have any of these on you these will be disposed of. If you have been asked by the team to bring in any specialist, prescribed medication these will be removed and stored safely.
- Any drink and food including chewing gum and sweeteners.

## Reducing Restrictive Practice, and the Use of Force at Riverdale

Riverdale Grange Hospital is committed to reducing the use of restrictive practice and protecting the fundamental human rights of each individual in its care.

Restrictive interventions should be used for no longer than necessary to prevent harm to the person or to others, be a proportionate response to that harm and be the least restrictive option.

Please see the Use of Force booklet, which aims to explain why and when any physical interventions may be used, and how this may be done.

If you have any further questions, please ask a staff member.

## Observations

To ensure your safety you will be observed by staff at defined time intervals whilst you are in the hospital.

### Hourly (General) Observations

All patients are checked every hour as standard; this is so staff can ensure everyone is safe and also know who is in/out of the building.

If at any point throughout your admission the staff feel that you are at risk to yourself, the hourly observations may be increased to intermittent observation (the frequency of this will be set by the team) or constant observation (a member of staff with you at all times) to help keep you safe. This will be discussed with you at the time and the team will aim to reduce these as soon as it is safe to do so.

### 4 Hourly Physical Monitoring

When you are first admitted you will likely have your physical observations taken every 4 hours, including blood pressure, temperature, and blood sugar levels. This is so staff can ensure your physical well-being. This will be reviewed by the GP and nursing staff and reduced when appropriate.

## Outcome Measures

Throughout your admission there may be some questionnaires you are asked to fill in, below tells you a little bit about them and why they are important to you and Riverdale.

### EDE-Q

The EDE-Q or 'Eating Disorders Examination Questionnaire' is a questionnaire we use at the beginning and the end of the admission (or more frequently if indicated). This can help staff to guide your treatment as well as show any changes which happen throughout your recovery.

### Care Programme Approach:

As part of your ongoing recovery, you and your team (including family, and community team), will meet approximately every 4 weeks to review to review your progress and plan ahead for discharge. This process is referred to as a Care Programme Approach meeting. You will often hear this referred to as your CPA meeting.

After each CPA you will be given a CPA feedback form. This is completed anonymously and can help ensure the CPA process is working as it should, and supporting your progress and recovery.

### Service Outcome Measures

Every three months the hospital needs to assess how it is doing, and the main part of this is getting feedback from patients. There are a couple of questionnaires you will be asked to complete as part of this. They aren't compulsory but the feedback you give can be really helpful and allows us to understand what we are doing well, and what might need some improvement.

## The Treatment We Provide

### Your Care Plan

You will have a written care plan which is a written document which you will be asked to help create with your named nurse and support worker. Your care plan outlines your treatment and will cover areas such as; diet, physical health and mental health support. This care plan is individual to you. Once written you will be asked to sign your care plan to show that you are in agreement with it.

All our patients have a right to information about the aims of their treatment. We will seek your consent for all aspects of your treatment.

We will use a team approach to your care and treatment. The team (usually known as the multidisciplinary team or MDT) will meet on a weekly basis with you to discuss your recovery and progress. It is an expectation that you attend this meeting.

The people present in the weekly MDT meeting will routinely be the Consultant Psychiatrist, a Nurse Dietician and a Psychological Therapist or Occupational Therapist.

### Consultant Psychiatrist

This is the Responsible Clinician who will lead the team and oversee all aspects of your care and treatment.

### Named Nurse

Your named nurse will be responsible for organising and carrying out your care and treatment with your involvement. They will work closely with you on a day-to-day basis helping plan your treatment and then supporting you in reaching your goals. They will also liaise with other people involved in your treatment including your family. Your named nurse will meet with you on a weekly basis.

### Mini-Team

Your named nurse will lead your mini team, which will consist of them and two support workers. These three individuals will be responsible for having oversight of your treatment and be the ones who are involved in implementing your treatment plan.

### Key Worker

As well as your named nurse, you will also have a key worker, who will be one of the two support workers on your mini team. Your key worker alongside others will be the person who helps you plan therapeutic activities such as snacks out, clothes shopping and shopping for and preparing food. Your key worker will meet with you once each week.

### Family Based Approach

The treatment we provide is known as Riverdale's FT-AN (Family Therapy Anorexia Nervosa). This approach is led by the Family Therapist. This is because family involvement is known to be useful in the treatment of eating disorders in young people. We know that recovery is more successful when parents/carers are fully involved. NICE Guidelines for the treatment of Anorexia Nervosa in young people under the age of 18, strongly recommended that families, particularly parents/ carers, should be involved in discussions that focus on the eating disorder and how best to manage it. The Family Based Approach includes:

- **Family Meals**

Eating with your family is an important part of our Family Based Approach and central to your recovery and so you and your family will be expected to participate in this as part of your treatment. In a planned way, we will support you and your family to eat some meals together at the hospital at home and in the community.

- **Family Therapy**

Family Therapy sessions will usually be held weekly or fortnightly. It is usual for you to attend sessions with one or both of your parents. If your parents are not living together, it may be that you will attend separate sessions with each of them. Sometimes young people are either cared for by other people in their lives or have significant others who are important to them, for example, grandparents, aunts, uncles, foster carer. When this is the case, it may be appropriate for them to attend some sessions too. It can be useful to include siblings too. Exactly who attends and when will be up to you and your carers. The focus of sessions is practical, looking at how your family can best support your recovery. Sessions also provide a safe space to say things to your loved ones that are sometimes difficult to talk about.

- **Carer's Programme**

Your carers will be invited to attend a carer's programme. This is an 8-week course that covers different topics each week, which are related to supporting recovery from an eating disorder. Sessions are held on a

weekly basis from 5.00-6.30pm. Your carers will meet other carers of patients on the ward in these sessions. After the session has ended, your carers are welcome to come and visit you.

### Cognitive Behavioural Therapy (CBT)

CBT can help you change how you react to difficult thoughts and feelings. It is primarily focussed on current problems rather than historical issues and will help you work towards clear goals within your admission. As part of your CBT you might also address body image issues.

People experiencing eating disorders can have a negative view of their body and so you will be invited to challenge the way you see your body and explore issues around this.

### Occupational Therapy (OT)

O.T. is a therapy that helps patients find balance, purpose and meaning to their lives, and make adaptations in order to regain and maintain occupational roles.

The OT service at Riverdale offers a specialist tailored programme starting within the hospital and progressing to community reintegration as a means of facilitating recovery. We use standardised assessments to set meaningful, purposeful goals; working in a solution-focused way to achieve change at a pace that is challenging yet achievable. The OT service offers therapeutic group and individual sessions to directly support recovery around food as well as a range of therapies that address some of the underlying issues that may be maintaining an eating disorder.

*As part of the OT team at Riverdale we have a Transition worker. Our Transition worker, will support patients to make plans and steps into transitioning back into education, employment and other activities in the lead up to discharge, and helped to make plans for your continued recovery following discharge.*

### What is Psychological Therapy?

Therapy is a treatment delivered by specially trained staff. Your therapy will help you to understand more about yourself, your illness, relationships and how you might start to move towards making changes. This will include understanding your feelings, how to take care of problems, and cope with difficult situations not necessarily related to food.

The therapies provided at Riverdale are: Cognitive Behaviour Therapy (CBT), Family Therapy and Self-Harm Formulations.

### Attending School

Riverdale has a classroom on site. Your clinical team will decide when you are ready to attend the classroom. The teachers at Riverdale will speak with the teachers of your school to make sure that we meet your specific learning needs.

As your treatment progresses the teachers will work with your school to support your return. This will be done in a gradual way

### Other Therapies/Meaningful Activity

There will be a range of other therapies/activities for you to engage in to support your recovery. You will have, during the first few weeks of your stay, a specific assessment with Occupational Therapy, this will help you and your team to plan meaningful activities in a purposeful way

### Progress Reviews (Care Programme Approach)

CPA is a framework for assessing, planning and reviewing patient care.

All treatment at Riverdale is planned and reviewed via the Care Programme Approach (CPA). Your first CPA will be within 3 weeks of your admission; and then approximately every 4 weeks thereafter.

The review is attended by you, your family and your MDT, your community team. Anyone else involved in your care will be invited to attend.

Before the review your named nurse, teacher, and therapists will all write a report of your progress. Reports will be written 4 days prior to your meeting and shared with you, so that you have the opportunity to review them and express your views. You will be encouraged to take an active part in the CPA. We understand it can be daunting being in a room full of adults but your views are the most important of everyone there and it is crucial for treatment planning that we hear them. You are able to invite a Patient Advocate to attend if you wish to support you in voicing your views.

## Your rights during treatment

Whether you are receiving treatment with us on a voluntary basis or whether you are being treated under a section of the Mental Health Act you have very clear rights. If you are a voluntary patient a leaflet called 'your rights as an informal patient' is available for you to access/refer to. If you are unable to find this, please ask a member of staff or the Ward Manager who will give you a copy of these. If you are detained, a member of the nursing team will read you your rights and also give you a specific leaflet.

## Leaving Riverdale

As you progress through your treatment, we will support you in increasing your confidence to leave Riverdale and return home. This will involve you gradually increasing the time you spend at home and at school. This will be a planned process which will involve you, your family, the Riverdale team and your community team.

Sometimes after being in treatment for a while leaving hospital can feel difficult or scary. You may feel anxious about having less support and this is not unusual. It may take time for you to feel comfortable settling back into your home environment. Once you leave Riverdale staff are not able to keep in contact with you. However, you are welcome to send postcards or letters to the team as a whole to let us know how you are doing should you wish to.

## Gifts

Staff are not able to accept personal gifts from patients and their families but cards for the staff team or handmade general gifts are acceptable.

## Accessing Interpretation and Translation Services

If your first language is not English or, if you require information which we provide to be available in other formats please speak to a member of staff or the Ward manager. The staff involved in your care will be happy to arrange for an interpreter, including British sign language.

## Meeting Your Needs

Riverdale aims to support patients in a variety of different ways. For support around gender or sexuality we have a number of resources on our LGBTQ+ board outside the nursing office, and the staff access training around gender, sexuality and identity through the charity 'SAYit'.

We offer a religious space and have a 'Religious Resources' folder in the patient lounge, alongside a variety of religious text. Please speak to staff if you are unsure where and how to access these. Riverdale also has links with local religious communities which we can support you to use in whichever way will best meet your needs.

## Consent to Treatment

### If you are 16 – 17 years of age

Adults, and anyone aged 16 and 17 must agree (give consent) to be medically treated, unless the person is detained under the Mental Health Act, or they do not have the capacity to consent and emergency treatment is necessary. Anyone aged 16 and 17 can also be treated if there is a court order authorizing the treatment or it is an emergency. An adult or someone aged 16 or 17 who lacks the capacity to consent to being treated may be treated under the Mental Capacity Act if it is felt to be in their best interests.

### If you are under 16 years of age

Young people under the age of 16 can consent to medical treatment if they are deemed to have sufficient maturity and judgement to enable them fully to understand what the treatment plan is. This is referred to as Gillick



competence. In some situations, if a young person aged under 16 refuses treatment (does not consent) then this decision could be overruled by their doctor if they are detained, their parents or if a court orders it.

### What if you are not considered to be 'Gillick Competent'

The decision to overrule the young person would need to take into account the psychological effect of having the decision overruled, as well as the physical effect of having the treatment.

When a young person is not deemed to be Gillick competent (they are not deemed to have sufficient maturity and judgement to enable them fully to understand what the treatment plan is or make an informed decision) Their parent can give consent for, or refuse, any treatment if it falls within what is called the 'parental zone of control'. Prior to treatment commencing the doctor will make a decision as to whether:

- The parent is acting in the best interest of the young person

The Doctor will then decide whether:

- The parent's consent is reasonable, given the type of treatment and the age of the young person.

If you want to know more about what Human Rights Law may mean for your situation then you should discuss it with your doctor, an advocate or a solicitor. Further information is available on the National Youth Advocacy

Helpline: [www.nyas.net](http://www.nyas.net) Tel: 0808 808 1001

### Confidentiality

All information held about you is confidential and shared only on a need-to-know basis in accordance with the law. This means that information relevant to your treatment will be shared within your direct care team and with other health professionals who have a need to know in order to meet your needs. Before your information is shared with anyone outside of the direct care team your consent will be sought.

If you would like to see your health records, you can request this by making a Subject Access Request. Guidelines on how to do this are available through the Information Commissioners Office. Follow this link for further information and guidance [ico.org.uk/for-the-public/personal-information/](http://ico.org.uk/for-the-public/personal-information/)

### Structured Daily Routine

**07.30** – Allocated weighing (on Wednesdays everyone gets weighed for MDT ward round).

**08.00** – Medication

**08.30** – Breakfast

**09.00 – 10.00** - An hour sit-down from when you finish breakfast.

**10.00 – 11.15** –Classroom (if relevant)

**11.15** – Morning Snack

**11.30** – Half an hour sit-down from when you finish snack, unless you are attending-the classroom.

**11.30 – 13.00** –Classroom or other meaningful activity

**13.00** – Lunch

**13.30** – An hour sit-down from when you finish lunch, classroom continues at 14.00

**15.15** – Afternoon Snack

**15.30** – Half an hour sit-down when you finish snack, unless you are attending school.

**16.00 – 17.00** Planned activity (Once a week we will hold a Community Meeting with all patients and staff on shift. Once a fortnight Peer Support Meetings will be held with all the patients; this is patient led).

**17.00** - Medication

**17.15** – Tea

**17.45** – An hour sit-down from when you finish tea. Once a week there is a trip out after tea.

**20.00** – Medication

**20.30** – Evening snack

**20.45** – Half an hour sit-down from when you finish snack.

Therapies, named nurse/key worker sessions, treatment reviews and groups are planned to take part in-between meals and snacks.



## Safety Whilst on the Unit

Your personal safety is very important to us and we have a nurse call system in every room including communal areas so that you can summon help. Please use these if you need the support of a member of staff at any point during your stay with us. Staff will show you how this works on your day of admission.

To maintain your safety and that of others the unit has a locked door policy. Should you wish to leave the unit and are not detained under the Mental Health Act please approach a member of staff who will discuss this with you.

## Nutrition and Meals

On the first day of your admission, you will have a meeting with the dietician. The dietician will speak to you about your eating habits and agree a meal plan with you.

All food is freshly prepared on the premises by our chef and the menus have been designed by the chef and dietician.

Our aim is to help you re-establish and maintain a normal diet of regular meals and snacks. If you have been eating very little, we will plan a series of steps beginning with smaller portions.

At Riverdale we fully understand that making changes to the amount and types of food eaten causes anxiety. Therefore, during mealtimes staff will eat with you in the dining room and will offer on-going support challenge and encouragement.

**There are three stages for mealtimes which you will work through as you progress through treatment;**

### Stage 1:

When you are first admitted, you will usually be supported one to one at meal times. A member of nursing staff is present at the table with you throughout the meal to provide close observation and offer support.

### Stage 2:

Once it is felt you can manage without constant staff support and supervision you will move to stage 2. At this stage a member of nursing staff is present, but may leave the table briefly. There is also likely to be at least one other patient eating at the table.

### Stage 3:

Once you and the team are feeling more confident that you can manage appropriate portion sizes and food types you will begin to self-portion your own food. Self-portioning allows patients to begin to take back the responsibility for portioning their own meals and be more independent. This is likely to begin with portioning breakfast.

## More information on meals

During your meeting with the dietician, we will discuss with you your personal likes and dislikes which will be recorded at the care planning stage with your named nurse. We recognise that 'scary' foods may be part of your dislikes and we will work with you to gradually introduce these into your diet.

**Dietary requirements will only be catered for in cases of cultural or ethical beliefs, or on instruction from a doctor or dietician.**

## Sit-Down Periods

Rest is a very important part of treatment. Therefore, there are periods of prescribed rest within the structured day. If your physical health is unstable, you may be prescribed continuous bed rest. Outside of the periods of prescribed rest you will be expected to access other opportunities to take part in more restful activity.

### When resting, we expect that you:

- Sit in a comfortable and restful position on a soft chair, keeping movement to a minimum
- Take part in quiet and passive activities (e.g. reading, listening to music, sewing, puzzles or chatting).

- Sit in the lounge unless otherwise agreed by staff.
- Respect those who have to sit for longer periods of times. It is difficult for most young people to do this so all young people and staff are to be respectful of this time.
- Try to support each other and give other patients the confidence to rest rather than encouraging negative behaviour (e.g. moving legs, tensed bodies, getting up unnecessarily, going to the toilet more than you require).

## Activity

When you are admitted to the unit your named nurse will discuss with you the levels of prescribed physical activity for you. This is based on your physical health and is individual to you. The level of activity prescribed may be very different from the level of activity you have been used to. Activity levels are carefully thought through and aim to safeguard you. Your named nurse will meet with you to discuss what support you might need in order to make these changes in activity.

When you have been assessed as physically stable you will have the opportunity to take part in a range of activities based on your own interests and work towards doing these at home when on leave.

Due to the effects your eating disorder is likely to have on your physical health we discourage exercising in your room out of the sight of staff. We understand that resisting the urge to do this might be very difficult and we will work with you to put measures in place to help you do this. This might involve having limited access to your room or being accompanied by staff when you feel a strong urge to exercise.

## Laundry

During your stay with us your family will be able to take away laundry for cleaning, however if this is not an option, we are able to provide laundry facilities on site for you to access with the support of staff.

## Smoking

The adolescent unit at Riverdale grange hospital is a smoke free environment. This is because it is illegal to smoke if you are under 18 years old and also illegal to buy tobacco for those under the age of 18.

Riverdale will provide funding for nicotine replacement patches for up to 3 months if required. On the adolescent unit, smoking cessation advice and support is also facilitated.

## Accidents, Incidents and Health and Safety

The staff will take all reasonable measures to avoid accidents. All accidents and incidents should be reported to the nurse in charge who will record the event and complete an incident form.

## Fire Precautions

It is important that you familiarise yourself with the fire exits and signs in the building. There is a weekly fire alarm test (of which you will be notified) and regular fire drills carried out to ensure safe and prompt action is taken in the event of a fire occurring. In the event of a fire do not panic, the nurse in charge will advise you of what to do and assist you to a place of safety if it is necessary.

### In the event of a fire/fire alarm being activated;

- **DO NOT USE THE LIFT**
- **DO NOT** attempt to collect your belongings.
- **DO NOT** run, as this causes panic.
- **NEVER** re-enter the building until you have been told it is safe to do so.

## Visiting Hours and Contact Details

We recognise the importance of your family and friends and how keeping in touch has a positive effect on your recovery. Whilst you are receiving treatment with us, we will support you to maintain continued contact with family, friends, and facilities in the community. This will be done through encouraging visitors and supporting you to go

home on leave when you are ready. Due to the structured routine at Riverdale around meals and other activities we ask families/visitors to please follow our patient visiting times:

**Weekend visiting times begin at 10am and end at 8pm Saturday and Sunday**

**Monday – Friday visiting times begin at 18:30 and end at 20:00.**

Staff need to be able support patients at snack times which are **11.15** and **15.15** visitors can take this opportunity to grab themselves a drink. All visitors are required to vacate the premises by **12.45** (lunch time on the unit) and can return at **14.30 at weekends**.

Visits will be organized and managed via the Nurse in charge or shift.

Visitors should not bring food into the premises for the consumption by patients. Visitors are also requested to declare to a member of staff any possessions taken from or given to patients so we can update their property records.

Patients can access Skype via laptops to contact family members who cannot be contacted by other means should this be required.

Families can access board games and DVDs when visiting the unit.

## Riverdale Grange Complaints Procedure

Complaints or concerns can be discussed with any member of staff but for some issues you may prefer to speak directly to the Service Manager or Ward Manager. We are happy to discuss any queries or concerns that you may have during your time with us. An appointment can be made by telephoning us or can be arranged through any member of staff. For compliments and other suggestions, you can also phone us, write to us or email us using the contact details below.

Riverdale Specialist Eating Disorders Hospital, 93 Riverdale Road, Sheffield, S10 3FE

Tel: 0114 2302140

Email: [info@riverdalegrange.co.uk](mailto:info@riverdalegrange.co.uk)

Should you wish to contact the Board directly with regards to a complaint you can contact Paddy Campbell (Chairperson of the Board) at the following email address [ipcampbell@hotmail.com](mailto:ipcampbell@hotmail.com)

Riverdale is registered as a provider with the Care Quality Commission and you are able to contact them directly to report any concerns which you feel are serious.

Care Quality Commission, National Correspondence, Citygate, Gallowgate, Newcastle upon Tyne, NE1 4WH

Tel: 03000 616161

Email: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

## Advocacy

During treatment you may feel that you would benefit from talking to someone who is independent and not directly involved in your treatment or related to you. This person is called an advocate and their role is to help you have your say and make sure that you feel heard.

An advocate will support you. What you say to them will be treated confidentially.

An advocate can be contacted through the Nation Youth Advocacy Service (NYAS). Leaflets are available on the ward and a member of the advocacy service attends Riverdale monthly to facilitate a group for the patients. You can also directly approach a member of staff to support you in accessing the advocacy service whilst with us.

### Advocates can:

- Attending meetings with you such as CPA reviews or ward round

- Review use of Naso gastric tubes
- Speak to the staff either for you or with you regarding any matter concerning your care, treatment or medication
- Support you in making a formal complaint
- Help you access and explain information to you
- Support you in obtaining a second opinion
- Support you in accessing a second opinion appointed doctor
- Support you to access your medical or social care records
- Support you in accessing other services

### If you are detained under the Mental Health Act advocates can help by:

- Supporting you to access Section 17 leave
- Explaining your rights in relation to your nearest relative including changing the nearest relative if you are detained.
- Supporting you to explore options and raise concerns about appropriate after care (Section 117).
- Supporting you if you are being considered for supervised community treatment
- Supporting you to appeal to the Tribunal or Hospital Managers
- If you have a guardian the Advocate can support you to talk about requirements that they are imposing on you

#### NYAS

Freephone: 0800 61 61 01

Text message: 07773334555

Email: [help@nyas.net](mailto:help@nyas.net)

## Accessing a Second Opinion

You can request a second opinion by speaking to your Consultant Psychiatrist or by contacting the Doctor or Psychiatrist who saw you before you were admitted (normally from your community CAMHS team).

## Acceptable Use of Technology

You are permitted to bring devices such as Mobile Phones, Tablets/ Ipads, Laptops to Riverdale upon admission. All patients are asked to agree to and sign a Use of Mobile Phone agreement- See end of booklet. Riverdale are unable to responsibility of any loss or damage to these devices, and these should be used as per the following guidance.

- Laptops can be used when on bed rest to watch DVD's with prior arrangement with the ward manager.
- Do not give out or post on a social networking site any information about yourself, including your home address, telephone number or email address.
- Under no circumstances should you give out or post on a social networking site personal details of any patient at Riverdale. This includes names, addresses, telephone or photographs. You should also not give out the address or telephone number of Riverdale.
- You should not post messages on social networking sites that include details of your treatment at Riverdale, or make any reference to other patients, their visitors or staff.
- You should not view, upload or download or in anyway access a website that includes information about eating disorders or other sites that may be detrimental to your health, including pro-ana websites for example.

Under no circumstances should you view, upload or download any of the following:

- **Any message that could constitute bullying or harassment particularly in relation to issues of diversity, for example gender, race, sexual orientation.**

- **On-line gambling sites.**
- **Pornography and terrorist sites – including right wing extremist, or any other inappropriate materials.**
- Any accidental access to any of the above should be reported to a member of staff.
- Download or distribute copyright information and / or any software available.
- Always respect privacy of others. Do not read information on their computers, unless you have their permission and they are present.
- Do not use a laptop/tablet/mobile phone belonging to another patient, without their express permission and them being present.
- Do not leave your laptop/telephone unattended without locking it first. Other people, including other patients and visitors should only use your laptop with your express permission.
- Members of staff should not use laptops/telephones belonging to patients.
- Be polite in your electronic correspondence. Appreciate that other users might have different views than your own. You should not use offensive language or swear. Do not write anything which could be interpreted as libel.

#### **Failure to comply with these rules may result in one or more of the following:**

- A letter informing your parents / carers about the nature and breach of rules.
- Any other action decided by the senior designated manager for e-safety at Riverdale Grange.
- Should a criminal offence have been committed, the police may have to be involved.
- If you do not understand any part of this Acceptable Internet Use Policy, you must ask your key worker, or the designated safeguarding professional at Riverdale Grange.

### **Here is a list of words and acronyms commonly used at Riverdale**

**Named Nurse:** The nurse who will be specially allocated to you to help you through your treatment and talk about how you feel.

**Key support worker:** One of the support workers who will support you and your Named Nurse with your treatment.

**Psycho-Ed:** Psychological Education (learning about the illness).

**Obs:** Blood pressure, pulse and temperature checks, or the level of support you may receive – how often staff check in on you.

**One to one obs:** Being accompanied around the unit by a member of the clinical team at all times to support you

**Sit down:** Prescribed rest time spent with staff and peers after meals.

**One-to-one:** Used to mean planned or individual meetings with your Named Nurse or Key Support Worker.

**CBT:** Cognitive Behavioural Therapy, weekly session with a Therapist which focus upon how thoughts, feelings and Behaviours affect each other.

**Body Image:** A type of weekly therapy which focuses upon how you feel about your body.

**MDT:** (Multi-Disciplinary Team) your clinical team.

**MDT Meeting:** A weekly meeting where your clinical team discuss the treatment we provide, sometimes called Ward Round.

**Community Meeting:** Where patients and staff discuss household issues on the unit.

**Peer Support:** Where patients spend time together to offer support to each other to aid recovery.

**Staff Walks:** Supervised walks with a staff member.

**Self-Portion:** Where patients are able to portion out a meal that has been prepared for them.

**Self-Catering:** Food preparation for meals, where patients shop and cook a meal for themselves.

**Leave:** Period of time allowed outside of the unit

**Family Meal:** Meal eaten with your family, which may be on or off the unit, where staff may offer support.

## Version Control

<u>Version Number</u>	<u>Type of Change</u>	<u>Date</u>	<u>Description of Change(s)</u>
1.0	First Issue	February 2023	N/A
2.0	Minor changes to wording	May 2024	Minor changes to wording

**Patient smart phone agreement of use form**

**(To be completed on admission or as soon as patient is able)**

<b>Patient name:</b>	
<b>Named Nurse:</b>	
<b>Date:</b>	

- I \_\_\_\_\_ (patient) confirm I have received my personal mobile phone as detailed above.
  - The use of mobile phones is prohibited during school/therapy sessions and meal times. The patients will be asked to place their phone in their safety box (found in their bedroom) during these times. If this agreement is breached, patients' phone will be removed and will be reviewed at the next available ward round.
- I understand that it is expected of me to adhere to the expectations of use as detailed below. I understand that failure to do so may result in the loss of use of my mobile phone until reviewed at the next ward round.
- I understand that I am not to use the camera function on my phone to protect the privacy and confidentiality of my fellow patients and members of staff.
- I also agree to use my mobile phone appropriately whilst on the ward and any inappropriate use may result in restrictions to the use of the phone, or it being confiscated for a period of time until risk assessments have been reviewed in ward round.
- I understand that my mobile phone is my responsibility and I will not lend out or allow other patients to use my phone. By doing so I acknowledge I will be giving up my mobile phone access.
- I understand that to charge my mobile phone I need to provide my own charger and hand it into the nurse's office at 22:00 where it will be charged.

Please sign and date confirmation of reading this document at the bottom on the next page.



Expectations of Use for Mobile Phones		
Situation		Consequence
Patient uses mobile phone to access material that may be detrimental to treatment such as calorie counter apps/ Pro Ana websites/ exercise regimes		Mobile phone access will be suspended until the next ward round where it will be reviewed.
Patient misuses the phone and is using the phone to harm themselves or others.		Mobile phone access will be suspended immediately and reviewed in ward round.
Patient is using phone against the advice of MDT; e.g. using mobile phone's camera, making calls or texts that cause distress to others		Mobile phone access will be suspended until the next ward round where it will be reviewed.
Patient receives a call in a communal area or during a meal time.		Conversations on the phone in communal areas and meal times are not permitted, however if the patient receives a call, they can take the call to their bedroom or ask the caller to call back at a more convenient time.
The mobile phone is damaged by another patient.		Riverdale Grange cannot take responsibility for loss or damage to privately-owned equipment while on the premises except when the device has been submitted to staff for safe keeping.
Patient has deliberately damaged a mobile phone belonging to another patient.		The context of the situation will be discussed and decisions regarding the service user's responsibility and mobile phone access will be discussed in ward round, if deemed appropriate.
Patient is using phone during therapeutic sessions or meetings that is causing disruption or lack of engagement in the session.		Patient will be asked to put phone away in the bedrooms. If the patient refuses to do this, mobile phone access will be taken away and reviewed at the next MDT.
Patient signature:		Date:
Carers signature (if under 16):		
Named Nurse's signature:		Date:
Named Nurse Name (PRINT):		

Ensure the patient is offered a copy of this form and a copy is placed in the patient's notes on SystmOne.



# DINING ROOM ETIQUETTE



**The below has been developed in order to support each of you and provide a calm relaxed environment.**

For patients and staff to arrive for meals promptly.

The dining room should always have at least one member of staff present during meals and snacks for your support.

Please do not bring mobile phones, magazines or bags in the dining room at meal times.

We ask that you do not wear hoodies or jackets in the dining room.

We ask that you sit correctly at meal times to help maintain a calm relaxed atmosphere; eg not cross-legged, shaking legs.

Tissues can be a distraction and so are used at the table at staff discretion.

Staff will work with you to plan your meals, in line with the menu, unless otherwise care planned.

Meals cannot be reheated due to health and safety.

Where you are sat on a table with I-I will be served their meals and drinks by staff. Patients seated on the Self-portioning table will be supported by staff to portion appropriately.

Be respectful to each other, staff and other patients.

Please do not use excessive amounts of sauces and condiments e.g. tomato sauce, vinegar or excessive use of spices and herbs, One sachet of salt and two sachets of pepper per patient, per meal.

We ask that you only have A maximum of two glasses of water or squash during meals and snacks and one hot drink afterwards.

We are here to help you challenge you're eating disorder and so any scraping butter from bread, squeezing food and/or picking things apart will be discouraged, staff are here to support you.

We ask and encouraged to use cutlery appropriately.

We all need to eat appropriate size mouthfuls of food and to avoid cutting food into tiny amounts.

Staff will accompany you to the lounge on completion of their meals and snacks.

Please do not use the toilet or bathroom facilities in sit down periods.

**Thank you**