

Stepping Stones

Your Guide to Millfields Unit



“Therapy is really difficult but you get out what you put in”

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Introduction to Millfields

Our current patients and staff put this information pack together for people who have been referred to Millfields, so they know in advance what to expect – and what we expect of them – if they are offered a place. If you have any more questions you can write direct to the Head of Service, Dr. Celia Taylor at: Millfields Unit, John Howard Centre, 12 Kenworthy Road, Hackney, London E9 5TD.

What is Millfields?

Millfields Unit is one of three purpose-built medium secure units, and is part of a joint project by the Ministry of Justice and the Department of Health. Its aim is to develop mental health services for men who are identified as posing a significant risk to others as a result of having a severe personality disorder.



You might find staff intrusive at first but its part of the culture of enquiry – they need to know where your head is.”

Millfields Unit runs as a Therapeutic Community (TC). A central feature of the TC is the “**culture of enquiry**”, where patients or staff can talk about and explore any aspect of our relationships and how we live and work together. This helps us to develop insight into how others experience us, and new ways of dealing with challenging situations.

Why might Millfields be right for you?

The reason you’ve been referred to Millfields is because you’re thought to pose a risk of re-offending in a way that could seriously harm others, and because you might suffer from a personality disorder. One of our forensic psychiatrists and senior nursing staff will come and assess you, so we can find out whether you fit our admission criteria. Then our referrals panel will decide whether to offer you a place. If we do, it will be because we think that we can help you to tackle your offending and the personality difficulties that are linked to it. We will aim to help get your life back on the right track.

“In prison you can stay under the radar: you don’t have to look at yourself and your old behaviours. If you’re really up for change this is the place.”

Your fellow patients

Your 15 fellow patients will be serious offenders with similar personality difficulties to yours. Most of them have committed violent or sexual crimes (although we don't accept people with a pattern of sexual offending against children). Everyone is expected to disclose their offences and to explore them in depth; we realise this might take time. We expect openness and honesty, and will support you in this work. We believe in seeing the person behind the crime.

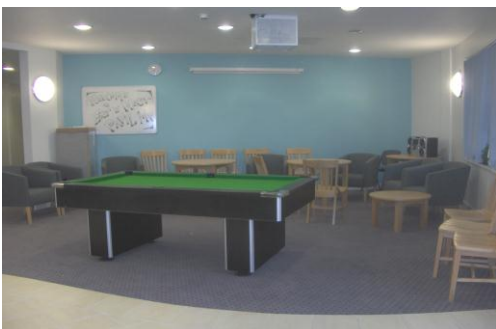
When you arrive

When you first arrive some members of staff and a patient will be there to greet you, introduce you to the others and show you around the building.

“When I first came I thought, “Beam me up Scottie”. But now I’m glad – I think it will help me deal with my problems.”

You will be placed on **Continuous Supportive Observations** on the day you arrive, which means a member of the nursing staff will keep you within eyesight at all times. This might feel rather intrusive, but the aim is to make sure that you and those around you are safe, while we start getting to know you. These will be reduced to 15-minute observations while you are asleep overnight and into the following morning, until the staff Morning Handover Meeting at 9am, when we will have a team discussion. If we think we can stop them, we will. If we think we need to extend them we will let you know why, and continue to review them each morning.

“A big problem when I came here was how you’re observed 24 hours – it felt like I was in a goldfish bowl and seemed over the top. Further down the line, I understand why – for other peoples’ safety and for them to understand you.”



For the first 24 hours you won't be allowed to use the patients' phone. You'll have a pat-down search, and your property will be searched and listed. Any Restricted Items (see in Appendix One) will be put in your own box, which will be stored in the nursing office. All **electrical goods must be PAT tested** before you can use them in your room (unless they are battery operated, and unless they have been PAT tested by this Trust in the last 12 months).

There is an **emergency pack** for patients who don't have essential items when they arrive. If you are detained under Section 45a or 47/49 you won't be eligible for benefits, so you'll be given a

Clothing Grant of £200 per year, which will be paid in quarterly £50 instalments. You will also receive £20.00 per week from the Trust.

You will be offered a full medical examination by the ward doctor. This is a good time to start looking after your health by getting any physical problems checked out.

Starting therapy

You will start a 12-week Orientation to Therapy (OTT) Group as soon as there are enough new patients to join in. It takes place on a Tuesday or Thursday morning, while the patients who have been here longer go to their Small Groups. While you're waiting for the OTT to begin, you'll use this time (1½ hours) to meet with members of your clinical team and undergo some psychology assessments. It counts as therapy time, so you're expected to sit in the ward day area, without access to your bedroom or the smoking pod. You will be allowed to make hot drinks in the kitchen, but **once OTT begins this will cease. Patients who fail to attend their formal therapy sessions (individual or group) are not allowed access to the kitchen.**

We are planning to have a New Starters' Group in the near future, for people who have recently arrived. We will let you know when this is due to begin.

"If you can get through this you can do anything."

Your bedroom

You can have **up to 100 hundred items in your room**, such as shoes, clothes, towels, books and magazines. This excludes electrical items and CDs, DVDs or Games, which are mentioned below. You can keep one each of the following electrical items in your room:

- **Television:** maximum 22-inch screen with or without Freeview (either box type or flat screen, must not have built in Blue Ray, DVD recorder or hard drive).
- **Freeview box without card slot:** currently permitted but subject to review in the light of technological advances. Must not have a hard drive.
- **DVD player:** can be in a combination unit with the TV, but must have no hard drive or recording capability.
- **Games console, excluding Xbox 360, Play Station 3, Play Station Portables:** must not have "Blue Ray" or the capability of copying or burning DVDs or CDs.
- **Hi Fi system:** with maximum of 2 speakers capable of up to 280 watts (must not have the capability to record or burn CDs).
- **MP3 player:** capable of storing and playing music, but not films
- **Personal CD player.**

- **Memory stick:** up to 1 GB.

This list will be kept under review as technology advances. One only of each of these items will be stored in the patients' property cupboard when not in use. You are also allowed **a total of 25 CDs, DVDs or Games** in any combination. A further 30 CDs, DVDs or Games in any combination can be kept in a box in the storage cupboard on the ward.

When you arrive at Millfields, you will be given the option of marking your property with a UV (Ultraviolet) pen. This means that the mark will be invisible in normal light but will show up under ultraviolet light. Marking property in this way will help you to keep track of your belongings, as well as to deter theft of property.

You will have monthly random room searches, and reactive ones can take place at any time. You'll be invited to be present for these. Room searches should not take longer than about 20 minutes, which is why the number of belongings you have there must be reasonable: they will be checked against your property list to ensure they don't exceed the above numbers.



Assessment and Treatment: What is Involved

Millfields Unit runs as a modified Therapeutic Community (TC), which means you will be more involved in how the place runs than perhaps you're used to. So patients – with help from staff – are responsible for chairing meetings and planning activities. Your opinions and ideas will be listened to. What you say and do will be taken seriously by the whole Community. You'll have to look hard at the difficulties you experience inside yourself and within relationships, as well as the risks you pose to yourself and others, since these tend to be closely connected.

Although we do offer some individual work, most of the therapy takes place in groups, where you will have to confront the difficulties you experience with other people rather than hide away from them. Your treatment won't be complete until you've really learned how to think about, and repair if necessary, your relationships with patients and staff on the Unit as well as (within reason) anyone you are in touch with who is important to you.

“Bear in mind that it's not an easy option and if you are intent on doing therapy it's for the long term.”

People suffering from severe personality disorder have real difficulties in how they relate to others, including socially. The social activities are therefore an essential part of the therapy, and we expect you to take part in them. This includes eating your meals with the other patients and staff in the Dining Room, and not sleeping during the working day.

Our commitment to you is to provide treatment that:

- Is structured, consistent and has a focus and purpose that you can understand.
- Is tailored to meet your individual needs.
- Involves a clear and honest relationship between you and the clinical team.
- Lasts long enough to give you a chance to change.
- Where possible, and if you want, is “joined up” with other important aspects of your life, such as your family and where you hope to live.

Your commitment to us should be to:

- Attend all groups and individual sessions regularly.
- Take a genuine, active part in the therapy.
- Stick to the Unit rules and boundaries.

- Learn to resolve difficulties with your clinical team or fellow patients, without resorting to solicitors or the police.

If you don't make a real commitment to treatment and make progress, or seriously break the rules, we might transfer you back to prison or to another service.

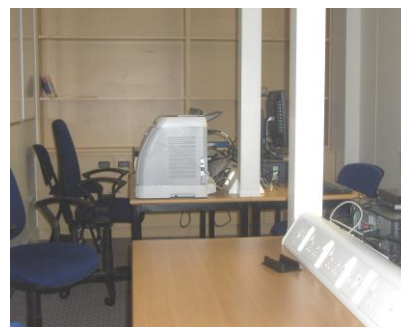
Your clinical team

Your Clinical Team will consist of different discipline representatives including:

- Primary Nurse and Associate Nurse
- Psychologist
- Small Group Facilitators
- Social Worker
- Occupational Therapist
- Staff Grade Psychiatrist or Specialist Registrar (both are senior trainees)
- Psychotherapist
- Art Psychotherapist
- Consultant Forensic Psychiatrist

We are a training centre and so students might work as part of your Clinical Team, under supervision. We expect patients to agree to their full involvement in their clinical care.

When you've settled in we will start assessing your difficulties, the risks you pose to yourself and others, and your treatment needs. Some assessments will take place through us seeing what you do and say in meetings and on the ward, while others consist of more in depth conversations between you and members of your clinical team. Some assessments take the form of psychology questionnaires.



The Department of Health requires us to carry out these assessments, so we expect your co-operation with them. In fact, most patients find they help to get a better understanding of themselves, so we'll discuss the results with you. We'll repeat some of the assessments at intervals, so we can measure your progress.

Your treatment goals

Your treatment goals will be decided by staff in a **Formulation Meeting** that will be held a few months after you arrive, when we've got to know you better and have completed the assessments. Your Formulation will be fed back to you – including what we think you need to work on and

how. We'll expect you to discuss it in a Community Meeting, so everyone knows your treatment goals and can give you feedback about your progress.

The therapy programme

Therapy is seen as 24/7, in that as well as formal groups we use patients' daily behaviour and interactions to help us understand them and to make links with their offending.

"You have to have a strong head and really want to change."

Treatment sessions take place daily during the week. Broadly, treatment sessions are divided into two types:

Core therapies

Every patient in the Unit must attend these therapies:

- Orientation to Therapy Group (12 weeks)
- Community Meetings (3 per week), which are attended by all the patients and most staff, or around 25 people. When a new patient or staff member arrives, everyone is asked to disclose his index offence and say a bit about his treatment goals.
- Small Group Psychotherapy (twice a week), with up to 8 patients and 2 - 3 staff.

Specific therapies

Patients attend these therapies depending on individual need:

- Substance Misuse
- Sexual Offending
- Violence reduction (includes anger management)
- Art Psychotherapy (group or individual)
- Individual Psychotherapy
- Occupational Therapy activities, such as picture framing, computers, gardening, cooking, gym and sports
- Social activities, such as meals and events on the wards and in the Pavilion
- Education
- Work: there is a range of paid ward jobs and voluntary roles of responsibility that allow patients to take part in the day-to-day running of the Unit



Monitoring your progress

As a guide we divide patients' stay in Millfields into assessment, treatment and discharge phases. The assessment period lasts 6 months, treatment 12 – 18 months and discharge 6 months. These timescales are approximate, and depend upon your commitment to therapy.

“Look in the mirror – do you see a person who wants to change or not?”

If at the end of the assessment period we – and you – think the programme at Millfields is the most suitable treatment for you, you will start the treatment phase. On the other hand, if we – and you – think that another kind of treatment would suit you better, we will return you to prison (if this applies to you) and refer you to an alternative service. We will also transfer you out if you are not committed to taking part in treatment – because there are many other people who are, and would make good use of the opportunity to change.

Patients from prison will return there to complete their sentence plan once their treatment in Millfields is completed. Patients whose sentence has expired, or who are detained under Section 37/41 or a Notional Section 37, will be discharged into the community. We will work with your probation officer (if you have one) and others such as social services, community mental health teams and housing to help you move on.

Ward rounds

Every week we briefly discuss 7 or 8 patients in a Ward Round attended by all members of staff. Each patient is therefore discussed every 2 weeks. You will be expected to write a paragraph about how you see your progress, for us to consider during our meeting. Feedback is given during the Community Meeting that follows. The patients also have a discussion between themselves, and also give their feedback in Community Meeting that follows.

“When I first came and people talked about boundaries I thought they were digging me out.”

Care programme approach (CPA) review meetings

Six weeks after your arrival, and every 6 months after that, we'll hold a case conference called a CPA Meeting, to review your progress with your treatment goals. Each member of your clinical team will write a report about how you're getting on, and make suggestions for what you should continue to work on, or focus on next. These reports will be shared with you. You can invite a relative, friend or solicitor to your CPA. We will invite any outside professionals who are involved in your case, such as your probation officer (if you have one).

Clinical review meetings

These are held 3 months after your CPA Meeting, and are a more informal review of your progress. For this reason, no reports are written for this meeting, and no visitors are invited.

Requests

- All requests to purchase electrical equipment must be submitted to the Security Department via your Primary or Associate Nurse.
- All other minor requests must be made in writing to the Ward Round with a rationale. Examples include asking for Courtyard Leave, unsupervised shaving, and for purchasing items (such as clothing) that cost over £50.
- Major requests, such as for Community Leave, must be brought to your CPA Meeting.

Your physical health

The main John Howard Centre has a GP service, a chiropodist and a visiting dentist.

Treatment: What we Expect of You

All patients are expected to:

- Attend all the Core Therapies and those Specific Therapies that we think are necessary to address your treatment goals. Dropping out of therapy will be seen as a violation of your treatment programme, and there will be consequences for you. If you disengage permanently, we will refer you elsewhere or send you back to prison.
- Work towards a daily routine that balances therapy, education, work, leisure.
- Work at finding constructive ways of dealing with your thoughts and feelings without causing harm or fear to others.

“This is a chance to break the cycle – a place where people are civilised. There is no culture of criminality compared to prison.”

- Keep appointments arranged by staff, and be on time for these and any meetings, groups or other activities.

Sickness

We know that, at times, patients will feel physically or emotionally unwell, and we aim to respond sympathetically to this. However, we expect this to be rare, and that mostly you will make every effort to continue with your treatment programme.

- If you feel unwell, please let the Shift Co-ordinator know before 9am.
- The Nursing Staff and / or Ward Doctor will assess your physical health, and if you really are too ill to attend your sessions you will be allowed to rest in your room.

Confidentiality

The therapy programme operates on the basis of openness and honesty, even when there are difficult things to talk about or admit. This will take some getting used to, especially when it comes to discussing your offending, which we do expect you to do. However, there are certain things staff will not mention in Community Meetings without your permission, such as your index offence, private family business or any physical health problems. Of course, you can talk about these if you wish. A more detailed Confidentiality Protocol will be available for you to read when you arrive.

We do recommend that you think carefully what information you share with your fellow patients outside the therapy sessions.

“You are around other people a great deal of the time”

Bullying

Millfields has an anti-bullying protocol, which was written by the staff and patients working together. It is about the different kinds of bullying that can happen in secure units and prisons, and how we will respond. We felt it was important to address the issue up front, because bullying is hard to talk about openly. Nevertheless, it has the power to disrupt people’s treatment and how successful it is – either on an individual level, or by undermining the therapeutic values and the therapeutic safety of the Unit as a whole. Therefore, any kind of bullying between patients is not considered to be acceptable in Millfields.

The anti-bullying protocol describes a number of ways in which we respond to bullying. Some of these are preventative measures, in that they are designed to reduce the opportunities for bullying. Other methods are more reactive, which means that they are put in place after an incident of bullying has been observed or reported. However, the effectiveness of both kinds of response depends on everyone in the Unit. So it’s important that we foster a culture within the community where everyone is able and willing to explore the topic of bullying.

This kind of culture will only exist if each member of the community accepts some responsibility for contributing to the effective management of bullying. One way we can achieve this is for patients to share their observations and/or experiences of bullying in the Unit – either by bringing them into the therapy groups, or by talking with staff members (some of whom act as ‘anti-bullying co-ordinators’). We do realise that this could be difficult to do, but the staff will support you. Of course, this is just one suggestion and you may well have your own ideas. It will be helpful for you to think about other ways in which you can help the community to manage bullying. The full anti-bullying protocol will be available for you to read when you arrive at Millfields Unit.

The Facilities

Millfields Unit is a new building that opened in March 2006. The 2 wards were extended and refurbished in 2011. One ward, West Ferry, is temporarily being used by Moorgate patients and staff, until their own ward is enlarged. Our ward, East India, has:

- 16 single bedrooms with their own showers
- A dining room and coffee-making facilities
- A pool table and a table tennis table
- A TV lounge with a DVD player
- A quiet room with 3 computers
- Group and individual therapy rooms
- Sky TV in the TV lounge



There is also a shared therapy area with:

- The Pavilion: a large room where we hold Community Meetings and social events.
- A gym with a treadmill, cross-trainer, exercise bike, rowing machine and weights.
- A multi-faith room.
- Occupational therapy, group and art therapy rooms.
- A “living skills” kitchen.
- An education room with computers and a library containing books, CDs and DVDs.
- Mental Health Review Tribunal rooms.

“Look in the mirror – do you see a person who wants to change or not?”

Outside is a garden with an outdoor table tennis table and facilities to play basket ball and badminton, as well as benches for just sitting quietly. Anyone who is interested and who is thought to be safe using tools can join a gardening group and help to look after the plants.

Millfields Unit Rules

In order to maintain a safe and therapeutic environment for you and everyone else in Millfields, we expect you to stick to the rules. Any rule-breaking will be discussed in Community Meetings, Ward Rounds, CPA Meetings and Clinical Reviews. A major breach of the rules could result in your being removed from the Unit.

We now have a comprehensive Handbook of Rules that was written by patients and staff together. You will be given a copy when you arrive, so that you know where you stand. These are the most important rules:

1. General rules

- Alcohol, illicit drugs (including gas and solvents), medication that has not been prescribed for you, and suspected drug-taking equipment are not allowed.
- Smoking is only allowed in the smoking pods and outside the building.
- You must follow the fire safety rules. This includes leaving the ward if the fire alarm sounds, even if it is a practice drill. The nursing staff will tell you where to go.
- Patients are allowed to keep no more than £50 cash in their possession.
- Take-away meals can be ordered on Wednesday and Saturday evenings only.

2. Behaviour towards others

- Violent, threatening and bullying behaviour are not allowed and could lead to your removal from the Unit. Physical assaults on staff or patients could lead to prosecution.

“Violence is not tolerated – don’t come here with a criminal intent- but you will be helped if you come with the right attitude.”

- Likewise, damaging and stealing property are not allowed. You might be asked to pay for anything you damage that belongs to the unit.
- Please show respect towards your fellow patients and the staff: be considerate in your behaviour and do not do anything that could put you or other people at risk.
- No racism, sexism, homophobia or any other forms of discrimination are allowed. Language used offensively will be challenged by staff and by fellow patients.
- Sexual relationships with other patients, or with staff, are not allowed.

3. Lending, giving and trading items

Patients often want to give each other belongings they no longer need, trade them, or lend things, including money. This is allowed, but **only if it is done out in the open and not in secret. Please discuss what you want to do beforehand on each occasion, with a member of your nursing team. This is partly to make sure you understand and accept the possibility that what you lend might be lost or damaged by the person you lend it to.** The staff member you speak with will make a record in your progress notes. However, **the Trust will not be able to offer you compensation.**

We also want to avoid one patient taking advantage over another, or more serious bullying. Alternatively, we recognise that lending or giving can simply be acts of friendship or support – which we welcome. If we think it would be useful, we will ask you to talk about the meaning of your part in the exchange in your Small Group.

4. Your room

- Please do not put pictures on the walls of your room that might cause offence or embarrassment to others.
- On rare occasions your room might be locked if you are using it to avoid engaging in treatment, although we'll talk to you about this first.
- The nursing staff will carry out random room searches. You'll also be searched when leaving and returning to the ward after certain groups, and after leaving the Unit.
- Patients are not allowed into each others' rooms.
- There is a security box in each patient's room, for use if you have been cleared by your clinical team for Level 3 self-medicating.

5. Restricted items

- A list of Restricted Items is included in Appendix One.
- The clinical team will decide which Restricted Items you are allowed to have, if any, following a risk assessment.
- Restricted Items must be kept in your box in the nursing office, and you will be asked to sign them out and back in again. Having to ask for items (such as toiletries) from the nursing office can take time to get used to.
- Restricted sharp items and memory sticks will not to be issued to anyone after 8pm, and must be handed in by this time.
- Any item that is used or abused to the detriment of others, whether physically or emotionally, can become a Restricted Item.

6. Night time

To encourage a healthy sleeping pattern and make sure you're rested for the next day's therapy, you'll be expected to be in your room between midnight and 6am Sunday to Thursday, and 1am and 6am on Fridays and Saturdays.

How we will respond to rule breaking

- Rule breaking will be discussed in the Community Meetings. The clinical team will also review each incident.
- If you have broken the Unit rules, your Care Plans will reflect any concerns the clinical team has about you, and how we are going to respond.
- The clinical team reserves the right to remove you from the Unit if, in our opinion, your behaviour seriously disrupts the life and work of the Unit.

Other important information

Courtyard leave

- All patients will be allowed daily access to the courtyard for fresh air. New patients will start with 15 minutes' escorted courtyard leave, and the clinical team will carry out a risk assessment before deciding how many escorts are needed to take you out safely.
- Requests for more courtyard leave should be submitted to the Ward Round, and no increases will be agreed outside this meeting.
- On weekdays courtyard leave is from 12:30 pm to 1pm.
- At weekends courtyard leave is 45 minutes long, although the times can vary.

"You might see it as a swerve but this is no easy ride compared to prison."

Smoking

- Smoking is only allowed outside the building, either in the smoking pods or while on courtyard leave. Smoking in your room is not permitted.
- The smoking pods are open four times a day:

8:15 am – 9:30 am 12:30 pm – 1:45 pm 5:15 pm – 6:30 pm 7:15 pm – 8:30 pm

- No smoking is allowed outside these time or during therapy sessions, when the smoking pods will be locked.

- No more than 3 patients are allowed in the smoking pods at any one time.
- Visitors are not allowed to smoke on the ward (this is Trust Policy).

Ward telephone

- There is a patients' phone on the ward; please be considerate in how you use it.
- Calls should be made outside therapy session times and before midnight.
- If you abuse the phone, limits will be put on your use of it.
- You will be allowed to call your solicitor or other external professionals if you need to, but only outside session times (except in the case of an emergency).

“Once the penny drops it’s up to you to decide if it’s for you or not.”



Visitors

i) How your visitors are approved

- Give your social worker the details of anyone you want to invite to visit you, including his or her phone number.
- Your proposed visitor will then be contacted by your social worker to make sure he or she understands that the John Howard Centre is a secure unit, and the rules about what can be brought in and what isn't allowed. Your social worker might go and see your visitor in person, if it seems as though this could be helpful.
- Your social worker will then have a discussion with the rest of the clinical team in the Ward Round, before your proposed visitor can be approved. The whole process can take around 2-3 weeks, which might seem slow compared with prison. The reason is that we need to get to know you a bit better first.
- Visitors to the ward must be over 18. Child visitors (those under 18) are only allowed if this is the interests of the child – there is quite a complicated Trust policy that we have to follow to make sure this is the case. Approved child visitors are usually relatives of the patient, or

have an established relationship with him. All visits involving children are held in the child visiting room in the Main Reception, and are directly supervised with a member of staff in the room.

ii) How to book visits

- Visitors are welcome 5.30pm – 8pm weekdays, and 10am – 8pm at weekends. If your friends and relatives find it difficult to come at these times we'll be flexible, but no visiting will be allowed during therapy session times.
- Your visitors will need to give 24 hours' notice before coming, by ringing the ward.
- Each patient can normally have up to 2 visitors at any one time. If you want to have more than two, please make a request via the Ward Round.
- Any Restricted Items your visitors bring you must be handed to staff for storage in the Patients' Property Cupboard. Your visitors are not encouraged to bring food, and if they do staff will check it by emptying it onto a plate.

iii) How visits are supervised

- Initially all visits are directly supervised, with a member of staff in the room.
- After we have got to know your visitor a bit, you can request indirect supervision via your Ward Round. This means that a member of staff will sit just outside the room while the door is left ajar.
- If this also goes well, after a while you can ask via your Ward Round for your visits to be discreetly supervised. This means normal ward levels of supervision, so a member of staff will just look in from time to time, through the window in the door.
- Staff can stop a visit at any time, if they have any cause for concern.
- You can also stop your visit at any time you wish.

“You have a responsibility not just to yourself but to the community.”

Drugs and alcohol

Although many of our patients have drug and alcohol problems, Millfields is not a drug rehabilitation unit. It is a drug-free environment and you must be willing to take a drug test when requested. If you refuse, this will be treated as a positive result.

If you have broken the rules about drugs or alcohol, you will be asked to explain yourself to all the other patients and staff – in a Community Meeting, and to write a plan for how you're going to avoid doing so again.

Complaints

Everyone who comes to Millfields has difficulties in relationships with other people. The Therapeutic community helps our patients to face up to these, to hear feedback – and give it – and to repair any hurt caused. We know that this is not always easy, but making formal complaints at the drop of a hat can be a way of avoiding the process. Therefore, we expect informal complaints to be taken to a Community Meeting for discussion, to try to resolve the matter – in our experience, this process is very successful.

Obviously, if you have a legitimate, formal complaint, you have a complete right to raise it. This is the process outlined in the Trust's leaflet on How to Make a Complaint:

“To make a comment or complaint, you can begin by speaking to any member of staff. This may include your nurse, care coordinator, doctor, ward manager, social worker or receptionist. If you have a complaint, our staff will make every attempt to resolve your concerns immediately. However, if you prefer you can contact the Complaints Team on FREEPHONE 0800 085 8354.

“Alternatively, you can contact the Trust's PALS Officer (Patient Advice and Liaison Service) on FREEPHONE 0800 783 4839. PALS aims to negotiate quick solutions to problems or questions. It also holds information about local and national support organisations. PALS does not replace the Trust's formal complaints procedure”.

If you do decide to make a formal complaint, we would still encourage you to bring it to a Community Meeting, as it might highlight important areas for the community to discuss and/or learn from.



Appendix I – Banned and Restricted Items List

In order to make Millfields a safe place for everyone, all patients and their visitors are asked not to bring the following items onto the wards:

- Glass, including bottles, jars and inside picture frames (although glass jars of food can be kept in the secure cupboard in the kitchen)
- Fire-raising items such as matches and/or flammable liquids
- Alcohol
- Drugs, whether prescribed or illicit, including solvents
- Weapons, whether real or replica, or items which could be misused as a weapon
- Pornographic material, such as magazines or DVDs
- Blue tack or chewing gum
- Tinned material such as cans
- Cassettes, cameras or video recording equipment.
- Mobile phones, camera phones, 3G internet phones, etc
- Videotapes and CDs (blank or pre-recorded)
- Modems
- Burning incense
- Foil

The following are also not permitted under any circumstances:

- DVD recorder or rewriter
- Digital Video Recorder (DVR)
- Digital Television Recorder (DTR)
- Video Recorder (VCR)
- CD rewriter
- Combination units that allow recording (to a hard drive or to another tape or disc)
- Play station 3
- X Box 360
- MP4 player – including IPOD's, (excluding the IPOD Shuffle)
- Any Blue Ray or Wi Fi device
- Standalone Microphones, Dictaphone, Voice Recorders
- Cameras of any type

If you are in any doubt about what you can bring into the Unit, please ask a member of staff.

There are some items which you can bring onto the Unit, but which you'll need to give to staff so they can put them in your Restricted Items box, for example:

- Cigarette lighters
- Toiletries including aerosols and razors