WELCOME
TO McLEAN HOSPITAL
TABLE OF CONTENTS

Arriving at McLean
5

Inpatient Rights
13

Advance Directives
21

Helpful Information
27

Campus Map
32

Research at McLean
34
As a music legend known for his slick rhymes and distinct voice as part of the Rock & Roll Hall of Fame trio Run-D.M.C., Darryl hid a deep secret from most of his fans, friends, and family: despite the fame and accolades, he was battling severe depression, suicidal thoughts, and alcoholism.

*I had everything—I was the King of Rock—we were touring, making money, and everyone knew who we were. But I didn’t feel right, and not a day passed that I didn’t think about suicide.*

These feelings eventually led Darryl into a treatment program, where he learned that he was not the only one struggling.

Today, Darryl is back in the recording studio, has a best-selling book about his experience with mental illness, and is a vocal mental health advocate.

**Darryl**

New Jersey  |  Musician

“I’m not crazy for feeling this way.”

---

The leading causes of disability in the U.S. are psychiatric disorders, followed by cardiovascular and circulatory diseases and cancer.
The portraits and stories shown here and on pages 12, 20, and 26 of this brochure are from McLean Hospital’s Deconstructing Stigma public awareness campaign. The campaign was developed to spark conversation about mental health and inspire a change in how people with these common disorders are viewed. 

DeconstructingStigma.org
Arriving at McLean

When you arrive at McLean’s Belmont campus, you will meet with clinicians in the Clinical Evaluation Center (CEC). A mental health specialist (MHS) will talk with you and gather preliminary information as the first step in a thorough diagnostic psychiatric evaluation.

Initially, for your safety and the safety of others, the MHS will check to see if you have items that could pose a hazard. Your personal belongings will be stored safely in a locked space. You will be given an identification wristband, which you should wear at all times.

The MHS will provide an orientation to the CEC and check your vital signs. A nurse will assess and attend to your nursing care needs, including medications, and ask about any unstable medical conditions or safety concerns. A clinical evaluator then will conduct an initial evaluation, helping the clinical staff determine which hospital inpatient program best meets your needs. The evaluation also helps the clinical staff develop your initial treatment plan. Based on this admission assessment, medication may be started or continued, and tests may be ordered. Your participation is very important during this process. Please ask questions and share your concerns.

Up to two family members or friends, except for children under 18 years old, may stay with you (if you permit them) while you are in the CEC. Family and friends will be asked to step out of the room for all or part of the evaluation so you can give private information to the treatment team. Formal family meetings are not routinely part of the initial evaluation. These will occur later, at an inpatient program with staff who will follow you throughout your stay and become more familiar with you and your family.

Family members or friends with information that is important for clinicians to know during the initial assessment should ask to speak with staff if they do not have an opportunity to provide this information during the evaluation.

Typically, this process takes three to four hours. Part of this time is needed to write the initial admission note, record information about your treatment plan, and talk to your insurance company. At the end of this process, you will be admitted to an inpatient program or directed to the most appropriate setting for your care.

FOR PATIENTS

What happens when I arrive at McLean?

How long does the admissions process take?
McLean Hospital recognizes that some patients have limited means and may not have access to insurance coverage for all services. We therefore have a financial assistance program for uninsured patients and underinsured patients with limited financial resources. Visit partners.org/financialassistance to learn more.

You will most likely be asked to tell us about yourself a few times, one time with each professional who meets with you. Different staff will listen to your answers for different purposes. We want to be as thorough as possible as we work with you to develop your treatment plan.

You will be asked to sign release of information forms for your insurance carrier, primary care physician, psychiatrist, and therapist. These releases are required so we may communicate with your insurance carrier and with your health care providers outside McLean.

Later in the process of your treatment, you will be asked to sign additional release of information forms in order for staff to speak with your family or friends.

Is financial assistance available?

Why do different McLean staff ask me the same questions?

What releases will I be asked to sign?
<table>
<thead>
<tr>
<th>What happens if I am admitted?</th>
<th>If you have been admitted, a staff member will accompany you to the inpatient program in which you will be staying. If family or friends are present, they may go with you to the program. In some circumstances, they may be asked to wait until you are settled in your room. You will be assigned a clinical treatment team who will take care of you during your stay.</th>
</tr>
</thead>
<tbody>
<tr>
<td>What happens if I am not admitted?</td>
<td>If you are not admitted to a McLean inpatient program, you may be referred to one of McLean's residential or partial hospital (day) programs, or to our outpatient services. Alternatively, because of your treatment needs and/or your health insurance provider network, we may refer you to a community mental health provider.</td>
</tr>
</tbody>
</table>
| What personal items and belongings will I need during my hospital stay? | **Clothing**  
Plan to wear casual clothes while at McLean and bring two changes of machine-washable clothes for day and night wear, including undergarments, socks, bathrobe, and slippers. Washing machines and dryers are available at every inpatient program. We also suggest that you have a pair of comfortable shoes and a jacket or coat. Please mark your name on all pieces of clothing.  
McLean has a limited supply of clean, donated clothing available in many sizes for patients. Program staff can assist you in contacting the clothing bank at 617.855.2118. If you receive an item, it is yours to keep.  
**Medications**  
To enable the clinical team to review your medications accurately during the admissions process, we recommend that you bring a list of all of your prescription medications to the hospital.  
Once you are admitted, all needed medications will be dispensed by the McLean Pharmacy in accordance with state and federal regulations and hospital policies.  
**Personal Care Items**  
You may want to bring items such as a toothbrush and toothpaste, shampoo, a hairbrush, eyeglasses, deodorant, and feminine hygiene products. Basic hygiene kits can be provided at no cost to you if you do not have these items.  
You should also plan to bring any durable medical equipment you may need such as a cane, wheelchair, CPAP machine, and hearing or visual aids. Items with cords may need to be kept at the nursing station. Please mark your name on all personal care items. |
Cellphones

To help promote focused engagement during group therapy and other aspects of treatment, some inpatient programs do not allow cellphone use while others discourage or restrict usage. A few inpatient programs permit only cellphones without cameras. Please check with the staff about cellphone policies at your program.

Computers

Computers and any electronic equipment that can be used to photograph or record sound or images are not permitted at McLean inpatient programs. Patients on the Belmont campus may check with staff about using computers available for patient use at the Cole Consumer Resource Center.

Restricted Items

Items that are not allowed at the hospital for safety and privacy reasons:

- Alcoholic beverages
- Razors
- Guns/weapons
- Knives/other sharp objects
- Cameras
- Glass bottles
- Matches/lighters
- Plastic bags
- Drugs/medications
- Mirrors
- Video/tape recorders
- Glass picture frames

Please check with program staff regarding policies on belts, dental floss, electric razors, hair dryers, nail clippers, MP3 players with headphones, cigarettes, and canned beverages.

Personal Valuables

McLean Hospital is not responsible for loss or damage to personal items, including eyeglasses, hearing aids, and dentures. We recommend that you keep jewelry and other valuables at home and not carry more than $10 in cash. Please consider sending valuables home with family. For privacy reasons, cameras and other electronic recording devices are not allowed at inpatient programs.
A mental health specialist or nurse will help you get settled at the program and in your room. All inpatient staff are available to answer questions and address concerns that you may have.

In addition, a publication called Guide to Inpatient Care at McLean Hospital is available at every inpatient program and at mcleanhospital.org. This guide provides answers to many questions and presents a lot of information that you and your family may find helpful.

Once settled, your family and friends may visit with you. In general, family and friends are allowed to visit during scheduled visiting hours and only if you wish to see them. Talk to a staff member about concerns you may have about visitors.

During your stay, a team of clinicians, including doctors, nurses, and a case manager, will oversee your care and treatment and help you on your way to recovery.
FOR FAMILIES AND FRIENDS

Up to two family members and close friends, except for children under 18 years old, may stay (with the patient’s permission) while the patient is being evaluated. Family and friends will be asked to step out of the room for all or part of the evaluation.

Any family member or friend with information that is important for clinicians to know during the initial assessment should ask to speak with staff if they do not have an opportunity to provide this information during the evaluation. Formal family meetings are not routinely part of the initial evaluation. These will occur later in the inpatient stay with staff at the program.

Patients who are 18 years old or older are legal adults with legal privacy rights. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) prohibits clinical staff from sharing information without a patient’s written consent. All health providers must comply with these federal regulations, which means that they must obtain formal permission to share information (including diagnosis, treatment, and prognosis) with you, or anyone else, even if you are a spouse, a parent, or a guardian of a patient. A patient provides permission by signing a release of information form.

Release of information forms can be signed during the admission process and can also be completed at an inpatient program. If the patient has not signed a release for the clinical staff to give you information, they cannot share any information. Please note, however, that you may share with clinicians any information that you think is important for the patient’s treatment and recovery.

Staff is available to answer questions. In addition, ask for a McLean Hospital publication called Guide to Inpatient Care at McLean Hospital or view it at mcleanhospital.org. This guide provides answers to many questions that you may have and presents a lot of information that you may find helpful. ❤️

When can I see my family member or friend who is being evaluated at McLean?

How do the privacy rules affect what McLean clinicians and staff can tell me?

How can I learn more?
As a special needs teacher and someone who has sought help for depression, Colleen understands the struggles of people with mental illness. She encourages everyone to pay close attention to those around them and offer encouragement.

People living with mental disorders feel shame. They are stereotyped. They are excluded from social circles. But they all deserve judgment-free access to care and the chance to get better.

Colleen
Massachusetts | Teacher
INPATIENT RIGHTS
McLean Hospital is dedicated to the prevention and minimal use of restraint and seclusion and, whenever possible, to the elimination of these interventions. This policy is consistent with our mission to treat people with dignity, respect, and mutuality; protect their rights; provide the best care possible; and assist them in their recovery. We welcome your help in working with us to achieve these goals.

**Voluntary Hospitalization**

If you admit yourself on a conditional voluntary basis and wish to leave, you must notify the hospital in writing. The hospital then has three business days (excluding Saturdays, Sundays, and holidays) in which to discharge you or petition the district court for your civil commitment.

**Three-Day Involuntary Hospitalization Under Section 12(b)**

Before being admitted for a three-day involuntary hospitalization in accordance with Massachusetts General Laws, you must be given the opportunity to choose conditional voluntary status. The involuntary hospitalization expires after three business days (excluding Saturdays, Sundays, and holidays) unless the hospital petitions the district court for your commitment. A hearing will then be conducted within five business days (excluding Saturdays, Sundays, and holidays) following the hospital’s petition to the court.

If you have been involuntarily hospitalized under Section 12(b), the hospital is required upon your request to contact the Committee for Public Counsel Services, and a lawyer will be appointed to meet with you.

If you have been involuntarily hospitalized under Section 12(b) and have reason to believe that the admission is the result of an abuse or misuse of the Section 12(b) admission process, you may request that an emergency hearing be held within 24 hours. The hospital will provide you or your attorney with a form to make this request.

**Court Commitment**

If the hospital petitions the court for your commitment, you may be required to stay at the hospital until a judge makes a decision to commit or discharge you. The court will appoint a lawyer for you.

**Right To Appeal Your Commitment**

If the judge has ordered you to be involuntarily committed, and you believe you should no longer be hospitalized, you have the right to appeal the commitment. To ask questions about your legal status at the hospital, contact McLean’s civil rights officer in Belmont at 617.855.3406 or in Middleborough at 774.419.1015. Additionally, you may contact a legal advocate or your attorney as discussed at the end of this guide.
Visits and Telephone Calls
You have the right to receive visitors of your own choosing daily and in private, at reasonable times. You have the right to reasonable access to a telephone to make and receive confidential calls, unless the calls violate a criminal law or would unreasonably infringe on other persons' use of the telephone. You also have the right to visit or talk by telephone with your attorney or legal advocate, physician, psychologist, clergy, or social worker, at reasonable times.

When visits or telephone use may be temporarily suspended: Your right to telephone calls and to have visitors may not be restricted unless such access presents an imminent risk of harm (based on your history of visits or calls) and there is no other less-restrictive way of preventing that harm, or unless such access significantly interferes with the operation of the facility. This restriction may not last longer than necessary and must be documented with specific facts in your medical record.

Mail
You have the right to send and receive sealed, unopened, and uncensored mail. However, for good cause, your mail may be opened and inspected in front of you without it being read by staff, for the sole purpose of preventing contraband coming into the hospital. Additionally, you have the right to be provided with stationery and postage in reasonable amounts.

Personal Possessions and Searches
You have the right to wear your own clothes and to keep personal items, including certain toilet articles, as safety permits. You have the right to individual storage space and to keep and spend a small amount of money. You have the right not to have unreasonable searches of yourself or your possessions.

Religion
You have the right to exercise your religious beliefs.

Psychological and Physical Environment
You have the right to a humane psychological and physical environment. You must be provided living quarters and accommodations that afford you privacy and security in resting, sleeping, dressing, reading, writing, bathing, toileting, and in practicing personal hygiene. This does not include the right to individual sleeping quarters.

Fresh Air
You have the right to reasonable daily access to the outdoors. These activities may be dependent on weather conditions as well as your clinical condition and safety, as determined by your treating clinicians.
Personal Affairs
You do not lose the right to vote, hold a driver’s license, marry, enter into contracts, and draft a will because you have been admitted to a psychiatric hospital or inpatient program. However, these rights may be affected by the terms of a guardianship or by your mental status.

Interpreter
You have the right to an interpreter at no cost to you.

Care and Treatment

Right to Treatment
You have the right to receive treatment that is suited to your needs and administered skillfully, safely, and humanely, with full respect for your dignity and personal integrity.

Information About Your Illness and Its Treatment
You have the right to be told the nature of your illness, the reason clinicians believe you need treatment, and the availability of alternative treatments. You have the right to know the name and position of your physician and other staff responsible for your care and treatment.

Right to Consent and Refuse Treatment
You have the right to consent to or refuse psychiatric medication or other treatment, except in an emergency or when a court has appointed a guardian to give consent for you or has ordered a particular treatment for you. Before consenting to any treatment or research, you have the right to be informed of its purpose, risks, side effects, and likely outcome, as well as the availability of alternative treatments (including the alternative of no treatment). You may change your mind and withdraw your consent at any time after granting it.

Access to Medical Records
You have the right to see your own treatment records unless doing so would result in serious harm to you. Your attorney may inspect your treatment records. Your records may also be released to others when authorized by you or otherwise allowed by law.

Participation in Treatment Planning
You have the right to participate in planning and implementing your treatment to the maximum extent possible.

Participation in Research
You have the right to choose whether to participate as a research subject or in any treatment examination whose primary purpose is educational or informational. If you choose not to participate, your refusal will not affect your access to essential care.
Restraint and Seclusion

You may be restrained or secluded only in an emergency—when there is an immediate and substantial danger to yourself and others—as prescribed by Massachusetts law. You may be secluded or restrained only for as long as it is necessary to protect you or others from harm. Your condition must be carefully monitored during restraint or seclusion. If you are restrained or secluded, you will have an opportunity later to comment on its use and the circumstances leading up to it.

Rules, Regulations, and Laws Governing Treatment

You have the right to review a copy of the rules and regulations that relate to your care and treatment at McLean. You may have additional rights granted by other state or federal laws and regulations.

Filing a Complaint

You have the right to file a complaint if you believe your care or treatment is inhumane, dangerous, or illegal. Hospital employees or the McLean civil rights officer will assist you in filing a complaint if you request assistance. Complaint forms are available in each program. Issues regarding individual care and treatment should first be discussed with your treatment team before filing a complaint. In the event that further assistance is needed, you may contact the clinical director of your program. Clinical issues that have not been satisfactorily resolved by your treatment team or the clinical director may be referred to the chief quality and risk management officer at 617.855.3128.

Complaints are filed with the chief quality and risk management officer. If the chief quality and risk management officer believes the complaint is serious, they will forward the complaint to the Massachusetts Department of Mental Health (DMH). The DMH licensing director will investigate and issue a written decision within 40 days. All complaints will be investigated and a written decision will be issued within 10 days.

Complaints or concerns regarding quality of care or safety also may be directed to the organizations listed at the end of this guide. The civil rights officer is available to refer you to the proper person(s) for issues requiring the attention of other organizations not listed.
Reconsideration

You have the right to request reconsideration of the decision issued, as indicated on the previous page. Such a request must be sent to the person who issued the decision and must be done in writing within 10 days of receipt of the decision. Such a request must specify the failure to interview an essential witness or the failure to consider an important fact or factor. The decision of such a reconsideration will be issued within 10 days of receipt of the request for reconsideration.

Appeals

You have the right to appeal either a decision on the original complaint or a decision on a reconsideration. All appeals must be made in writing within 10 days of receipt of the applicable decision. Forms are available from the hospital’s chief quality and risk management officer.

**Appeal from decision of chief quality and risk management officer:** Your appeal must be made to the DMH licensing director, who will investigate and render a decision within 40 days from receiving the appeal. You have the right to further appeal a decision to the DMH commissioner, who will issue a final decision on an appeal within 30 days of its receipt.

**Appeal from decision of DMH licensing director:** Your appeal must be made to the DMH commissioner, who will issue a final decision within 30 days.

**Access to legal advocacy organizations:** Upon admission or upon your request at any time while you are hospitalized, you must be provided with contact information for the Mental Health Legal Advisors Committee, Committee for Public Counsel Services, Center for Public Representation, Disability Law Center, and other organizations listed in this guide. These groups offer free legal assistance to psychiatric patients; you must be provided reasonable assistance in contacting attorneys or paralegals from these organizations and in meeting with them if they visit the hospital.
Civil Rights

Issues regarding a patient’s civil rights or hospitalization may be discussed with the McLean civil rights officer in Belmont at 617.855.3406 or the McLean civil rights officer in Middleborough at 774.419.1015.

Massachusetts Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880
781.876.8200

The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
630.792.5000

Massachusetts Department of Mental Health
25 Staniford Street
Boston, MA 02114
617.626.8000 (Central Office)
800.221.0053 (Information and Resource Line)

Committee for Public Counsel Services
75 Federal Street, 6th Floor
Boston, MA 02110
617.482.6212

Disability Law Center
11 Beacon Street, Suite 925
Boston, MA 02108
800.872.9992

Massachusetts Department of Public Health
Bureau of Health Care Safety and Quality
67 Forest Street
Marlborough, MA 01752
617.753.8000

Mental Health Legal Advisors Committee
24 School Street, Suite 804
Boston, MA 02108
800.342.9092

Center for Public Representation
22 Green Street
Northampton, MA 01060
413.586.6024
Randall grew up in poverty with a violent, alcoholic parent. Through his career in the military, law enforcement, and corrections, Randall endured many traumatic experiences, which led him to seek counseling for PTSD. Today, he uses his experience to help others. *I try to let people know that it’s natural to have strong responses to trauma—and it’s important to talk about it.*

Randall
Maine | Department of Corrections Commissioner

“One of the most effective ways to help is to let people know they’re not alone.”
5.2 million American adults are estimated to suffer from post-traumatic stress disorder in a given year.
All competent adult patients at McLean Hospital have the constitutional right to make their own informed decisions about whether to accept or refuse medical and psychiatric treatment, except in an emergency or pursuant to a court order. Under Chapter 201D of the Massachusetts General Laws, enacted December 18, 1990, competent adults may execute a health care proxy designating an agent to participate in and make health care decisions for them when they lose their capacity to make such decisions for themselves.

The information in this guide is offered when considering a health care proxy. However, because each person’s situation is different, detailed legal advice from a private attorney may be desirable to tailor the document to one’s individual needs.

What is a health care proxy?
A health care proxy is a written document by which a competent adult (the “principal”) may appoint an individual (the “agent”) to make health care decisions if the principal is unable to do so.

Who can execute a health care proxy?
Any individual 18 years or older who is considered competent to handle their own affairs may execute a health care proxy. The law presumes competency of the principal, and two witnesses must affirm the age, mental soundness, and voluntariness of the principal signing the health care proxy.

When does the health care proxy become effective?
After a physician has determined the principal to be incompetent and has notified the principal and the agent, then the authorities granted in the health care proxy can be exercised by the agent. A copy of the determination of incapacity and the health care proxy will be placed in the patient’s medical record.

What is the agent’s authority?
A grant of broad authority over all health care issues can be given, or the principal can limit the range of the agent’s authority. For psychiatric purposes, it is recommended that the principal establish clear guidelines within the health care proxy to instruct the agent concerning the following: psychiatric care and treatment, including admission to a psychiatric hospital; the use of psychotropic medications and, in particular, whether antipsychotics may be used; the possible use of electroconvulsive therapy (ECT); and the possible participation in research.
How will the agent make decisions?

The health care proxy is a directive to the agent stating the principal’s wishes regarding types of medical treatment, and it guides the agent when making decisions. The agent is to consult with health care providers; consider acceptable medical alternatives regarding diagnosis, prognosis, treatment, and side effects; and make decisions based on the principal’s wishes. If the principal’s wishes are not known, the agent is to assess what is in the principal’s best interests and consistent with responsible medical practice. The agent is empowered to receive the same information a competent patient would receive to assist in making informed health care decisions on behalf of the principal, including confidential medical information.

When does the agent’s authority end?

The agent’s authority ends as soon as the principal’s competence to make informed health care decisions is restored, as determined by the physician, or when the principal revokes the health care proxy.

How can a health care proxy be revoked?

The health care proxy can be revoked by executing a new document; by the divorce/legal separation of the principal and their spouse when the spouse had been named agent; or by revoking the document orally, in writing, or by an act that could be reasonably interpreted to indicate revocation.

Can a hospital require patients to execute a health care proxy?

No. The execution of a health care proxy cannot be required as a condition to being provided health care or insurance.
What would happen if the hospital and agent disagree about treatment?

Hospitals and physicians must honor an agent’s decision about treatment; however, they are not obligated to honor an agent’s decision contrary to their ethical or moral views or outside the accepted standards of medical practice. Agents may not authorize or approve mercy killing, and physicians cannot be prevented from providing comfort care. Health care decisions by an agent must be consistent with any limitations in the health care proxy. Disputes regarding treatment may need to be resolved by court proceedings.

What is the difference between a durable power of attorney and a health care proxy?

The durable power of attorney is regularly used for financial matters; the health care proxy is for health matters.

When should a durable power of attorney be considered?

A durable power of attorney is intended to deal with financial or other non-health matters and should be considered whenever continued financial matters may need to be dealt with after the principal becomes unable to make their own decisions.

Model Psychiatric Provisions for a Health Care Proxy

Included within the authority otherwise granted herein to my health care agent to make any and all health care decisions for me are the following powers:

1. To make any and all decisions regarding admission to, retention in, and/or discharge from a psychiatric facility;

2. To make any and all decisions regarding usual and customary medical and psychiatric treatment, including psychotropic medications;

3. To make any and all decisions regarding treatment with antipsychotic medication;
4. To make any and all decisions regarding treatment with electroconvulsive therapy (ECT); and

5. To make any and all decisions regarding participation in clinical research, including the use of investigational medications.

If my health care proxy, my appointment of my health care agent, and/or the authority granted to said agent (a) is revoked by me, (b) is determined to be legally insufficient by a probate court, or (c) is otherwise subjected to judicial review such that a guardian or further grant of authority is required, I wish to inform the court as follows:

1. That I nominate the person identified herein as my health care agent to serve as my guardian should appointment of a guardian become necessary. In the event that my appointed health care agent is not available, willing, or competent to serve or is otherwise disqualified, I nominate the person identified herein as my alternate health care agent to serve as my guardian.

2. That I request the authorities granted herein to my health care agent be similarly granted to my agent by said court or to my alternate health care agent should they be so appointed.

3. That I hold no religious convictions that might limit the authority I have granted or wish to have granted to my health care agent, alternate health care agent, or guardian.

4. That I wish to minimize in any way the possible impact or burdens on my family in terms of money, time, or emotional stress arising in this context.

5. That I hold no preferences for, or prejudices against, the use of specific treatments or medications, including antipsychotic medications, which would limit the authority that I have granted or wish to have granted to my health care agent, alternate health care agent, or guardian.

6. That I direct my health care agent, alternate health care agent, or guardian to consider my prognosis with and/or without treatment by antipsychotic medications, side effects, risks, benefits, and alternative treatments as the basis for the exercise of their authority.

7. That the authority I granted to my health care agent and alternative health care agent, and that which I would have the court grant to a guardian appointed for me, be sufficient to fully constitute my substituted judgment, as if otherwise established in a verdict of a court of competent jurisdiction.

This information about advance directives is provided to each patient upon admission in accordance with the Omnibus Budget Reconciliation Act of 1990.
As a writer and editor, Vaidehi knows that stories are powerful. When she started writing about her anxiety and depression, her life changed, and speaking out has become an important part of her recovery. She was raised in a South Asian family, a culture, she says, that often ignores or misunderstands mental illness.

*I think the biggest problem in my culture is that mental illness is not thought of as a serious illness. It’s considered to be ‘all in your head.’ Of course, we know that’s not true.*

Vaidehi remained quiet through high school and college, afraid that others might judge her. Today, with the support of friends and co-workers, Vaidehi is sharing her story and working with mental health organizations to help others tell their stories and get help.

**Vaidehi**  
South Carolina | Magazine Writer and Editor

"It doesn’t matter what other people say about you."

MENTAL ILLNESS AND STIGMA  
75% of people with a mental illness report they have experienced stigma.
What To Bring

You may use this checklist to note items that family and friends can bring for your use during your hospital stay.

**Clothing**
- Jacket, coat
- Sweaters, sweatshirts
- Jeans, pants
- Shirts
- Undergarments, underwear
- Shoes
- Socks
- Bathrobe
- Pajamas
- Slippers

**Personal care**
- Shampoo
- Shower gel, soap (and soap container)
- Deodorant
- Toothbrush/toothpaste
- Hairbrush/comb
- Makeup
- Feminine hygiene products

**Personal aids**
- Eyeglasses/contact lenses/other visual aids (with case and supplies)
- Cane, walker, wheelchair
- CPAP machine
- Hearing aids (and batteries)
- Watch

**Reading and writing materials**
- Magazines/newspapers
- Books
- Paper or notebooks without metal spiral binders for journaling

**Miscellaneous**
- Cellphone; please check with staff whether cellphones are permitted at your program
- Cash (less than $10)
- Other

McLean Hospital is not responsible for loss of or damage to personal items. We recommend that you keep jewelry and other valuables at home and not carry more than $10 in cash.

---

**Spirituality and Mental Health Program**

Through McLean’s Spirituality and Mental Health Program, our board-certified chaplain provides pastoral care to help you draw upon spiritual and religious resources for coping, to address existential struggles, and to provide for a wide variety of faith-specific needs.

Clinicians provide Spiritual Psychotherapy for Inpatient Residential and Intensive Treatment (SPIRIT) groups, which offer psychotherapy focused on your spiritual and religious needs. For more information, please call 617.855.2520.
### Hospital Operator
(24 hours/day) ................................. 617.855.2000

### Clinical Evaluation Center
(24 hours/day) ................................. 617.855.3141

### Civil Rights Office
Belmont campus ......................... 617.855.3406
Middleborough campus .............. 774.419.1015

### Clinical Trials
................................. 617.855.2867

### Consumer Comment Line
................................. 617.855.3128

### Information and Referral for
Outpatient Services ......................... 617.855.2300
Legal Services .............................. 617.855.2197
Patient Accounts ......................... 617.855.3301
Privacy Officer .............................. 617.855.4680

### Inpatient Program Telephone Numbers

#### Belmont Campus

**Clinical Evaluation Center**
Admissions Building, First Floor
Nurses' Station ........................... 617.855.2538
Patient Line ................................. 617.855.2375

**Alcohol and Drug Abuse Inpatient Program**
Proctor House, First Floor
Nurses' Station ........................... 617.855.2771
Patient Lines ............................... 617.855.3126

**Cognitive Neuropsychiatry Program**
South Belknap Building, Second Floor
Nurses' Station ........................... 617.855.2551
Patient Line ................................. 617.855.2641

**Community Reintegration Unit**
North Belknap Building, Second Floor
Nurses' Station ........................... 617.855.3280
Patient Lines ............................... 617.855.3167
  617.855.2377

**Dissociative Disorders and Trauma Inpatient Program**
Proctor House, Second Floor
Nurses' Station ........................... 617.855.2512
Patient Lines ............................... 617.855.3372
  617.855.3392

**Older Adult Program**
South Belknap Building, First Floor
Nurses' Station ........................... 617.855.2312
Patient Lines ............................... 617.855.2641

**Schizophrenia and Bipolar Disorder Inpatient Program**
Admissions Building, Second Floor
AB2 North
Nurses' Station ........................... 617.855.2554
Patient Lines ............................... 617.855.2263
  617.855.2342

AB2 South
Nurses' Station North Wing .......... 617.855.2564
South Wing ................................. 617.855.2515
Patient Line ................................. 617.855.2372

**Short Term Unit**
Admissions Building, First Floor
Nurses' Station ........................... 617.855.2564
Patient Lines North Wing .......... 617.855.2384
South Wing ................................. 617.855.2372
West Wing ................................. 617.855.2363
Personal Notes for Family and Friends

When someone you care about is in the hospital, it may be helpful to jot down reminders, questions you want to ask, what you want to say to others, information that could help the treatment team, as well as your thoughts and feelings.

The name of the case manager:

_________________________________________________

_________________________________________________

Case manager contact information:

_________________________________________________

_________________________________________________

The name(s) of the doctor(s):

_________________________________________________

_________________________________________________

_________________________________________________

The names of the nurses:

_________________________________________________

_________________________________________________

_________________________________________________

The hospital unit and location:

_________________________________________________

_________________________________________________

_________________________________________________

The phone number to the nurses’ station:

_________________________________________________

_________________________________________________

The number of the patient telephone line:

_________________________________________________

_________________________________________________

Information about your family member/friend that could be helpful for you to share with the treatment team.

Recent changes in behavior, speech, and functioning (such as sleeping, eating, socializing, personal care, etc.):

_________________________________________________

_________________________________________________

Recent changes in physical health:

_________________________________________________

_________________________________________________

Recent changes in relationships:

_________________________________________________

_________________________________________________

Recent changes in and history of alcohol and drug use:

_________________________________________________

_________________________________________________

Family history of mental illness or misuse of alcohol or drugs:

_________________________________________________

_________________________________________________
Recent changes in ability and willingness to take medication:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Past or recent trauma or abuse:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Current concerns for safety of patient and/or others:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

History of self-harm or suicide threats or attempts:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Patient strengths:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Family expectations for treatment:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Tell your family member or friend if you'd like to be involved as a partner in their care. Ask them to sign a release of information form so clinical staff may share treatment and aftercare planning information with you.

More information for families and friends of McLean patients may be found at mclean.org.
We dedicate ourselves each and every day to McLean’s mission of clinical care, scientific discovery, professional training, and public education in order to improve the lives of people with psychiatric illness and their families.

In all of our work, we strive to:
• Conduct ourselves with unwavering integrity
• Demonstrate compassion and respect for our patients, their families, and our colleagues
• Foster an environment that embraces diversity and promotes teamwork
• Achieve excellence and ever-better effectiveness and efficiency through innovation
For over 200 years, McLean has been at the forefront of psychiatric care, research, and education. As the largest psychiatric teaching hospital of Harvard Medical School, McLean maintains the biggest neuroscience and psychiatry research program of any private psychiatric hospital in the United States. Every day, our research teams strive to make discoveries and share knowledge that will continue to better our understanding of mental health and improve treatments.

At some point during your stay at McLean, you may be approached by research staff about participating in a study. We are incredibly grateful to individuals who are willing to help contribute to research, and we understand that your priority is clinical care. Across six academic divisions, researchers are currently studying a myriad of psychiatric conditions and components of mental health in the realms of depression and anxiety, alcohol and drug abuse, child and adolescent mental health, older adult care, schizophrenia and bipolar disorder, as well as trauma, borderline personality disorder, and eating disorders.

As we invite you to participate in our innovative research studies and clinical trials, we would like to emphasize that all research opportunities at McLean are voluntary, and you are welcome to choose whether to participate at any time. Your clinical care will not be impacted by your decision to participate in research. If you have any questions or concerns about research at McLean, please do not hesitate to call the Mass General Brigham Human Research Office at 857.282.1900.

We wish you well and are dedicated to helping with your recovery during your stay at McLean.

McLean Hospital complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, citizenship, alienage, religion, creed, sex, sexual orientation, gender identity, age, or disability.
WE’D LOVE TO GET YOUR FEEDBACK!

Was this guide helpful?

Did we miss anything?

What are the most important things for new patients to know?

Please share your ideas on how we may improve this guide to make it more useful for other patients and families by visiting mclean.org/feedback.