Dear Parent/Guardian,

It is recommended that your child receive treatment in an inpatient psychiatric hospital. Whether this is your first experience with this level of care or whether you have been here before, feeling overwhelmed and unsure of how best to support your child during this time is natural. There are a lot of emotions that you may be experiencing, including things like sadness, anger, guilt, shame, anxiety and many others. Some caregivers experience relief that their child will be cared for in a safe and secure environment. This booklet was created for you by parents who have been in your position. We hope the following pages provide some guidance as you move forward.

Please note that the inpatient psychiatric institution in which your child has been admitted is not affiliated with Texas Children's Hospital. The following is intended as a general guide only. Specific questions and concerns should be directed to the inpatient psychiatric institution.

Here are some common thoughts and feelings that many caregivers have expressed:

How did I get here?

There are many reasons young people feel suicidal. Sometimes children struggle with challenges around mental health, but an individual could be having a hard time finding the balance between the various stressors in their lives. It is easy for us as caregivers to look at their life challenges as "not a big deal," but to them, these life events (not doing well on a test or a break up) can feel really big and overwhelming. This is a challenging time for all caregivers, including you, as you put things aside to focus on your child. This guide walks you through what other caregivers have found important and helpful information to care for their child.

Why is a psychiatric hospital being recommended?

The term psychiatric hospital can be scary for a parent/guardian to hear. A psychiatric hospital recommendation doesn't mean your child is crazy or bad, just that they need time to work through some of their emotions. The psychiatric hospital may be able to help your child through therapy and/or medication and with an individualized treatment plan. You will likely be able to work with the therapists and physicians as your child receives treatment.

What do I tell people?

Generally speaking, your child's health information is private, confidential, and protected from disclosure under state and federal law, except as permitted by law in certain circumstances. As a parent/guardian, you generally have discretion to share your child's health information with your family, schools, and community.

What about school?

You may have many questions about school. How will my child make up for missed school work? What do I tell the school? How you work with the school is generally up to you and your child. Consider talking with a school administrator or counselor to help find balance for your child when they return to school (examples: school work, activities, and the social environment). If you are concerned about your child's privacy, consider expressing concerns to your school principal, assistant principal, and/or counselor. Just like in medical care, schools have similar privacy laws to adhere to. The school administrator will be able to talk to you about how they can support your child through this challenging time.

Questions to consider

Questions you may consider asking the inpatient psychiatric hospital regarding the care your child is receiving:

- Why is treatment at a psychiatric hospital recommended? How will this help my child?
- What types of treatment should I expect my child to receive while in the psychiatric hospital?
- How long should I expect my child to be admitted to the hospital? What factors will be used to determine when my child is discharged?
- Are there any additional/alternative treatment options that may benefit my child? What do those options look like?
- What will a typical day look like for my child?
- What can I do to support my child as we transition to the psychiatric hospital?
- Will I be able to visit and participate in my child's care while they are in the hospital?
- When will I be able to see my child? How often can I talk to my child?
- How does the hospital ensure the safety of my child?
- What does the intake process look like?
 - o When my child enters the hospital, what steps will occur from the moment of entry into the hospital till my child is settled in their room? What can I be present for?
 - o What clothes and personal items are my child allowed to have in the hospital?
 - o What is the process for checking my child and child's items to ensure they only have approved items on them and with them?

Questions you may consider regarding insurance and financial concerns:

- What psychiatric hospitals does my insurance cover?
- How many days of treatment does my insurance cover?
- How much does my insurance cover? What will be my responsibility to cover?
- If I do not have insurance, are there any resources available to help cover the cost of care?
- What are my options if I cannot afford treatment or my insurance denies coverage?
- Do I have a case manager, or can I have a behavioral health case manager?

Questions you may consider discussing with the inpatient psychiatric hospital when your child returns home:

- What do I need to do to keep my child safe when they return home?
- Once my child is discharged, what treatment and support will my child need?
- What should I do to connect with my child's school and keep them updated on their school work?

Additional information that may be helpful:

Is there something I should be doing with my insurance company?

Generally, insurance companies (including Medicaid) have behavioral health care coordinators. It may be helpful to call your insurance company and ask for your child to be assigned a behavioral health care coordinator. This person will be a resource as you move forward. If you do not have insurance, consider working with the care coordination team at the facility you are with to learn what resources are available.

What will the intake process look like?

Typically, as the hospital is ready to admit your child, you will be asked to fill out paperwork, meet with the team to provide information about your child's medical history, and answer questions about why your child needs to be admitted to the psychiatric hospital. During the intake process, staff may look through your and your child's belongings for safety purposes. Sometimes, hospitals may search your child to ensure nothing is in their clothing, so they may ask your child to remove some of their clothing. Many parents/guardians understand this process as appropriate care, but may also find it uncomfortable.

What can my child have with them at the hospital?

Every hospital has different guidelines, so it is essential to check with the specific inpatient psychiatric hospital your child will be going to so the expectations are clear ahead of time. Expect that your child will only be allowed certain items. Typically, hospitals will only allow an individual to wear certain types of clothes. For example, your child may not be able to wear clothes with strings (sweatshirts, sweatpants, shoes) or images that reference drugs, alcohol, or gangs. The hospital may ask you to take home your child's personal cell phones, jewelry, and other personal belongings. Please talk with the hospital about approved and not approved items.

What should I expect when I visit my child?

Before the visit:

Each inpatient psychiatric hospital will have different guidelines around visitation. You will want to talk with the hospital regarding their specific policies. Typically, there are certain times when you can visit and/or talk to your child. Your child's day will be structured with various therapy treatments like group therapy and individual therapy. When you visit your child, you may have to go through a safety check to ensure all items brought around your child is safe for them. If you are concerned about the hospital looking through your items, leaving those things at home may be best.

During the visit:

You will most likely visit your child in a central location vs. in the room or unit in which they are staying, but this may vary depending on the specific requirements of the inpatient psychiatric institution. You may have many different feelings during this time. As hard as it is, try to use your time with your child to simply support them, provide reassurance and check on their experience. Your child will be undergoing an adjustment phase, so they may not always be happy when you visit. As the days' progress, many parents/guardians find this time encouraging because they hopefully will begin to see improvements. If you have concerns about your child's care, bring those concerns to the inpatient psychiatric hospital's medical staff.

Who do I talk to when I check on my child?

The hospital may not call you every day to update you. We suggest you call each day to get an update. The following psychiatric hospital staff members with these titles may be helpful to speak to: a psychiatrist, a nurse on duty that day, a group counselor, or individual counselors.

People are asking to help; what do I tell them?

You will be pulled in many directions right now. Consider asking friends/family for help with household duties like cooking meals, getting groceries, managing the lawn, gathering hospital-approved items you can bring to the hospital, or helping care for your other children at home. Not only is this a tough time for your child, but it is also a tough time for you. As caregivers, we may need to be vulnerable and open to new perspectives and new caregiving processes, all while staying strong and calm for our child. This can be challenging. You need support too.

What should I do when my child comes home?

When your child comes home, it is often hard on them, hard on you, and hard for the other family members in the home. Remember, your child comes from a location where clinical and therapeutic support was available 24/7, so not having this constant resource may be challenging. Having a step-down approach, if available, is a great option. This includes programs like an Intensive Outpatient Program (IOP) or Partial Hospitalization Program (PHP). You can specifically request the inpatient psychiatric hospital's Care Coordinator to find and schedule the next steps for you. Reassure your child that their therapy and support will not stop when they come home. You will continue to work as a team to help them feel better. Your child needs to feel loved and supported, but life still goes on for you. You still need to cook dinner, do laundry, and work. This is a challenging balance. Keeping them involved in the support structure is a great way to check in with them and also feel your support.

What should I do with my child's safety plan?

It is appropriate and recommended to request a physical copy of the safety plan so you can have it easily accessible. You may want to take a photo of it on your and your child's phone. If you feel this plan is ineffective at any time, please work with your child and their therapist to make adjustments.

How to get medication or gun locks?

Gun locks can generally be found at locations that sell weapons. Consider visiting ProtectChildSafe.org for information as to free locks or a reduced-cost gun lock. Additionally, medication locks can be typically found at pharmacies.

Helpful links:

Please note that Texas Children's is not affiliated with any of these entities and cannot verify the accuracy of the information posted on the below websites:

- Texas Parent to Parent: txp2p.org
 - Provides support, information, and education for families of children and adults with disabilities, chronic and mental health conditions, and other healthcare needs.
- National Alliance on Mental Illness (NAMI): nami.org
 - The largest grassroots mental health organization formed by families and dedicated to building better lives for the millions of Americans affected by mental illness.
- Texas Health and Human Services: hhs.texas.gov
 Health and Human Services have many resources available. They can provide help with crisis intervention, case management, and full wrap-around services for your child.

Key Terminology

A helpful guide to understanding various medical terminology

Healthcare providers:

Psychiatrist: A medical doctor specializing in diagnosing, preventing, and treating mental health concerns. This physician can prescribe medication.

Psychologist: A provider specializing in how the mind processes information and human behavior. They specialize in the treatment of mental, emotional, and behavioral challenges. Psychologists are one type of provider that does therapy.

Mental Health Provider: A mental health provider generally includes therapists. These providers may come from various backgrounds, trainings, specialties, and licensures. A therapist can be a Licensed Professional Counselor (LPC), Licensed Marriage and Family Therapist (LMFT), or a Licensed Clinical Social Worker (LCSW). Most importantly, it is recommended that you want you to find a therapist with specific training in suicide treatment.

Care Coordinator: A care coordinator is typically a nurse or social worker who will work with you and your family to connect your child to their next level of treatment needs. Hospital and insurance company generally have care coordinators. They can be a great resource.

Patient Care Assistant (PCA): These professionals generally have a medical background and often take your child's vitals. At times, PCAs may also sit with your child in the room to ensure your child is safe in the hospital setting.

Types of intensive treatment programs:

Residential Treatment Center (RTC): This is a temporary living facility that provides intensive support to individuals with emotional and behavioral concerns.

Partial Hospitalization Program (PHP): A PHP program can be viewed as a midway point between treatment options, resting in the middle of a residential treatment program and the intensive outpatient program(, IOP). This method offers a longer duration of time in treatment during outpatient settings, and the individual can still live at home while working on themselves.

Intensive Outpatient Program (IOP): Individuals come to treatment multiple days a week with shorter sessions while and lives at home. An IOP program is a step-down program from PHP; the main goal of an IOP program is to help the individual further develop their healthy coping skills.

Commonly used tool in treatment:

Safety Plan: A written list of coping strategies and sources of support for individuals who are at risk for suicide. This plan is typically developed collaboratively with a clinician and the patient to determine what steps the individual feels they can take when they have unsettled feelings spanning up to suicidal feelings.

This list of key terminology helps patients and their families understand terms and concepts related to medical treatments.

Name:	Title:	
Location:	Contact Information	
Their role in my child's care:		
Reference Notes:		
Name:	Title:	
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